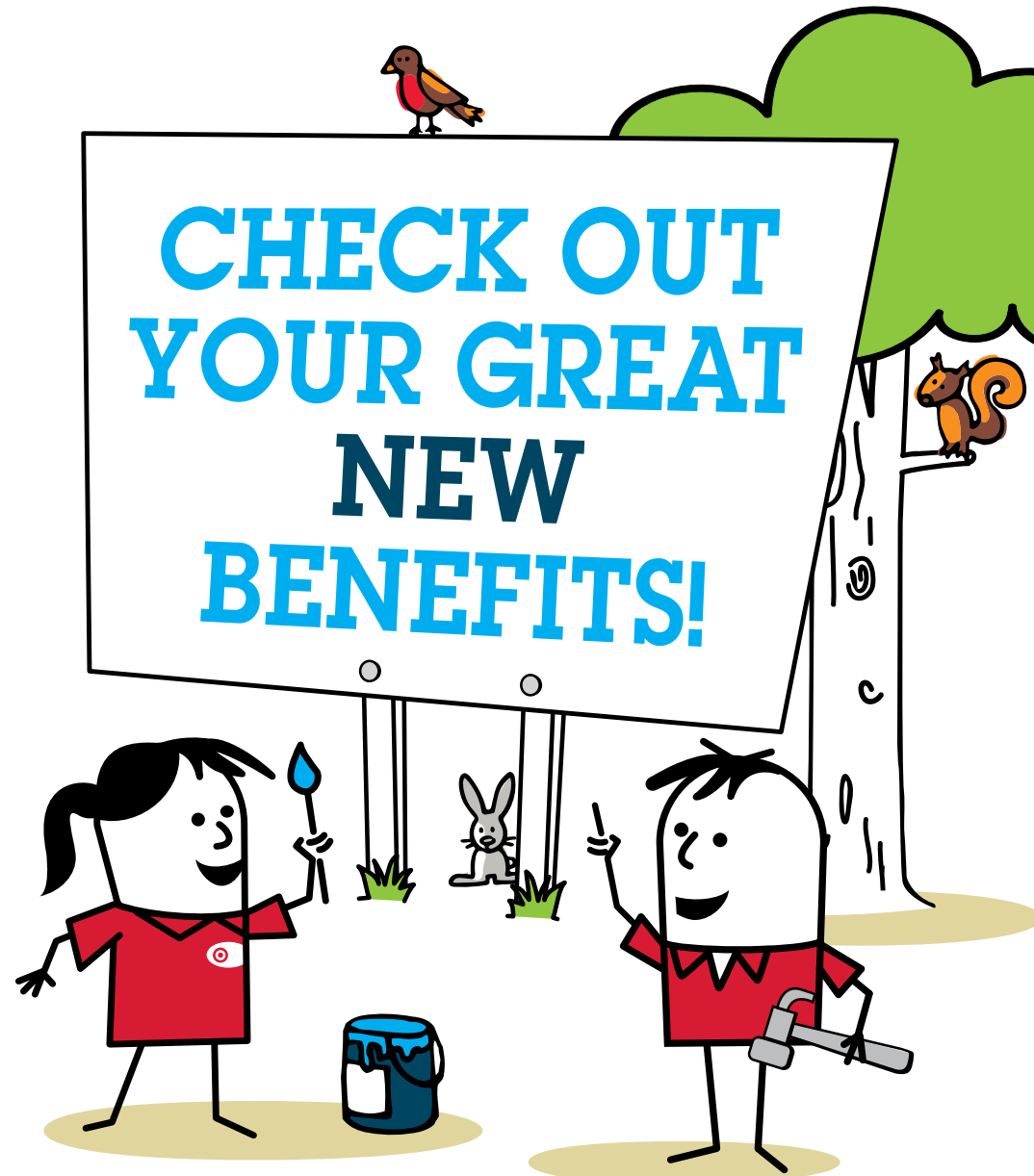


2017 Decision Guide

Full-time Guide



• Centro de Beneficios de Target
(800-828-5850)

2017 Decision Guide

Full-time Guide

Take this opportunity to learn more about your benefits and the ways Target is investing in you. You might be surprised to discover something new!

This guide will help you understand your options and make smart choices that improve your health and financial well-being.

Target continues to reserve the right to modify, amend or terminate any of the team member benefit plans or practices described in this guide. In all cases, the plan rules are the exclusive source for determining rights and benefits under the plan, and those rules will govern if there is a conflict with this guide.



The 2017 Benefits Plan Year is April 1, 2017 - March 31, 2018.

- ▶ **What's changing in 2017?**
- ▶ **How do I choose a medical plan?**
- ▶ **How can I manage my health care costs?**
- ▶ **Which dental plan is right for me?**
- ▶ **What about my eyes?**
- ▶ **How can I get and stay healthy?**
- ▶ **How can I save money and lower my taxes?**
- ▶ **How can I save for retirement?**
- ▶ **How does Target help protect my financial security?**
- ▶ **Who is eligible for benefits?**
- ▶ **What are the premiums?**
- ▶ **Where can I learn more?**

**Notice of Special Enrollment Rights
for Medical Coverage**

WHAT'S CHANGING IN 2017?

New benefits offer increased financial protection

- **Supplemental medical benefits help cover your family's expenses.**

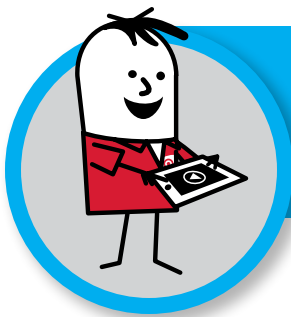
Target is offering three new benefits to support you when you or a family member is facing the significant expenses that often result from a critical illness, accident or hospital stay. Learn more about:

- [Critical Illness Insurance](#)
- [Hospital Indemnity Insurance](#)
- [Accident Insurance](#)

You do not need to be enrolled in a Target medical plan to sign up for these new benefits.

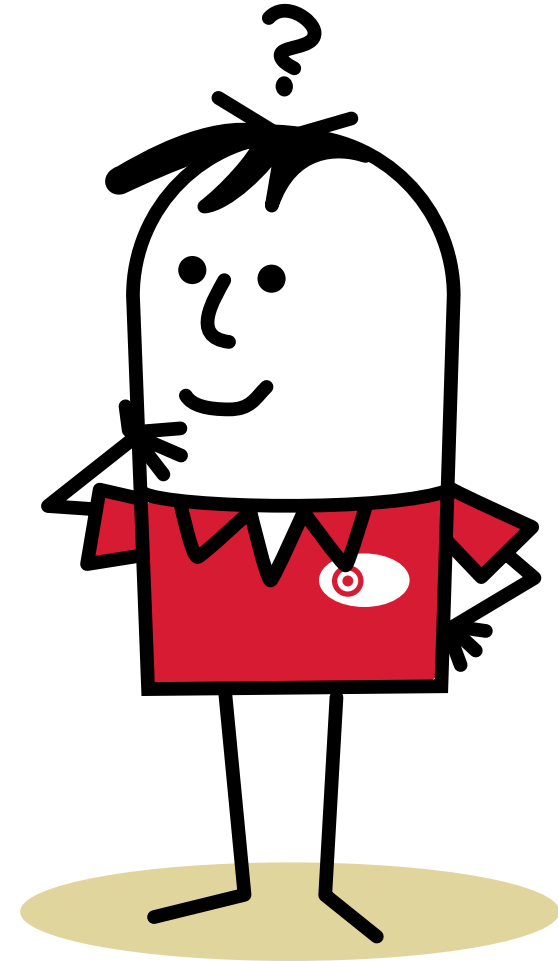
- **Identity Theft coverage helps protect your finances and credit.**

To give you peace of mind and take the headache out of the process if your identity is compromised, Target is offering full-service [Identity Theft](#) concierge support with a 100% resolution guarantee. Identity Theft coverage helps protect you from becoming a victim of identity theft by proactively seeking out fraud at the source. You get lost wallet protection, social media reputation monitoring and Rapid Credit Alerts at a lower rate than you would find on your own.



WATCH THE VIDEO

Click here to watch the
[What's Changing in 2017 Video.](#)



WHAT'S CHANGING IN 2017? *(continued)*

Medical

- **Increase in medical premiums**

There will be a slight increase in medical premiums for 2017.* For example, team members enrolled in Team Member Only coverage will pay:

- Approximately \$1.40 more per month for the HSA Plan
- Approximately \$5.50 more per month for the HRA Plan

The increase reflects the fact that total medical and pharmacy costs have continued to increase. Target still pays the majority of your premiums; in fact, Target covers more than two-thirds of the medical premiums for your coverage.

- **Increase in medical plan deductibles and out-of-pocket maximums in the HRA and HSA Plans**

The deductibles (the amount you pay before Target shares the cost of your medical bills) and out-of-pocket maximums (the most you could pay for health care services in a year) will increase by 2 to 6 percent, depending on your coverage tier, in both the HRA and HSA Plans.

- **Elimination of HealthPartners and Blue Cross Blue Shield of Alabama**

Team members in these two plans are eligible for coverage in a UnitedHealthcare plan. While these plan administrators will no longer be offered, team members can be assured of seamless coverage with UnitedHealthcare. Team members currently enrolled in one of these plans who do not choose otherwise during Open Enrollment will automatically be enrolled into the UnitedHealthcare HRA Plan.



*There is no change in premiums for the Kaiser HRA Plan. If this plan is available to you, the premiums will be shown to you during the enrollment process.

WHAT'S CHANGING IN 2017? *(continued)*

Prescription Drugs

- **Some generic medications available at no cost**

If you or a covered family member is diagnosed with a chronic condition such as high cholesterol, hypertension, asthma or diabetes, generic medications to treat or control the condition may be available at no cost to you.

Note: UnitedHealthcare members with diabetes must enroll in the Livongo diabetes management program to receive qualified generic medications with no copay.

- **Increased HRA copay for specialty prescription drugs**

The copay for specialty prescription drugs in the HRA Plan is increasing from \$70 to \$90.

Life Insurance

- **More affordable Life Insurance premiums**

Our new Life Insurance vendor, Prudential, will offer Life Insurance at lower rates for most team members. In addition, the new vendor offers the option of continuing your Life Insurance coverage if you leave Target, at affordable rates.

- **Increased Dependent Life Insurance maximum**

The amount of coverage in the Dependent Life Insurance plan is increasing from \$10,000 per child to \$25,000 per child. You still pay one low premium to cover all of your dependent children.

Don't forget! If you are currently enrolled in Supplemental Life Insurance, you can increase your coverage by 1 times (up to 6 times) without needing to complete additional paperwork.

Well-being Incentives

- **Well-being Rewards includes a financial well-being component**

Health Well-being Rewards will now be known simply as Well-being Rewards. While activities in the past have focused on health, the updated program will include activities that improve both your health and finances.

Remember, you have until March 31, 2017 to earn Health Well-being Rewards account dollars for the 2016 plan year. Well-being Rewards for the 2017 plan year can be earned from April 1, 2017 through March 31, 2018. Don't leave money on the table!

Lower premiums and expanded services in the Group Legal plan

- Our current Group Legal plan vendor is now offering lower premiums and expanded services. Some of the newly covered services include: estate administration, help with boundary or title disputes, and property tax assessments.



WATCH THE VIDEO

Click here to watch the [Team Members Talk: Favorite Benefits Video](#).

HOW DO I CHOOSE A MEDICAL PLAN?

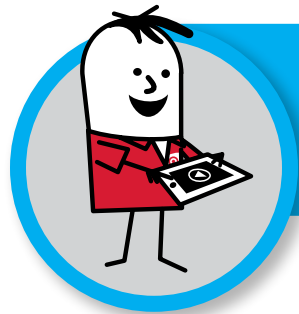
Choosing the right medical plan is really important—probably one of the most important decisions you'll make this year.

Target offers two account-based medical plans. They're designed to encourage you to make smart decisions about when and how you receive health care, saving you and Target money. Your options include:

- The Health Reimbursement Account (HRA) Plan, or
- The Health Savings Account (HSA) Plan.

Both plans offer:

- An account that you can use to help pay for your medical expenses until you meet your deductible.
- The opportunity for you to earn account dollars by completing activities that improve your health and finances through [Well-being Rewards](#).
- Automatic enrollment in the [Vision Exam Plan](#). You do not pay an additional premium. You may also want to consider enrolling in the [Vision Eyewear Plan](#) if you or your covered dependents wear glasses or contacts.

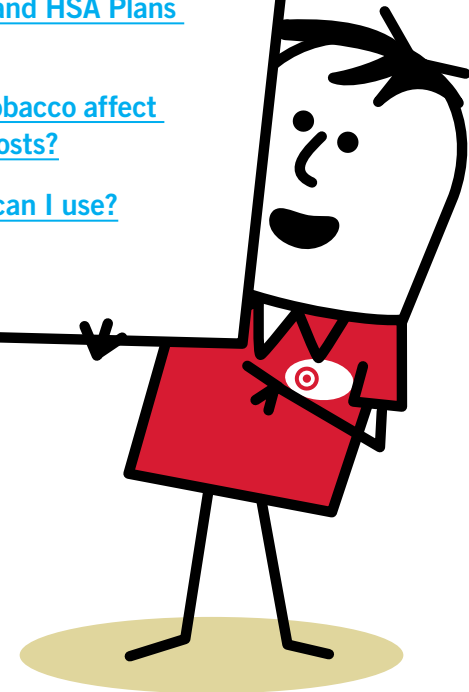


WATCH THE VIDEO

Click here to watch the [How to Choose Your Medical Plan Video](#).

Have more questions? See the links below for details.

- [How does an account-based plan work?](#)
- [How are the HRA and HSA Plans different?](#)
- [Does using tobacco affect my medical plan costs?](#)
- [What pharmacies can I use?](#)



HOW DOES AN ACCOUNT-BASED PLAN WORK?

It's important to understand how you pay for health care when you have an account-based plan like the HRA or HSA Plan.

To start, you pay premiums out of each paycheck. These are fees taken directly out of your paycheck before taxes to help cover the cost of your health insurance.

Target shares the cost of your medical care

Target is self-insured, which means that Target—not an insurance company—is responsible for the health care benefits we provide. Target pays the majority of the cost. First, Target pays more than two-thirds of the cost of your medical premiums. Then, once you reach your deductible, Target pays 80 percent of the cost of your care. Because we share the cost, if we all work to keep costs down, Target and team members both benefit.

Account-based plans provide coverage in three steps:

1) Deductible

You pay 100 percent of your medical expenses until you reach your deductible. Recommended preventive care is covered at 100 percent. If you have account dollars, they can be used to pay your deductible. Your [prescription drug expenses](#) affect your deductible differently, depending on which plan you choose.



2) Coinsurance

Once you meet your deductible, you and Target then share the cost of care. This is called coinsurance. As long as you are using an in-network provider, you pay 20 percent and Target pays 80 percent of the cost of eligible medical expenses. If you have account dollars, they can be used to pay for your portion of coinsurance.

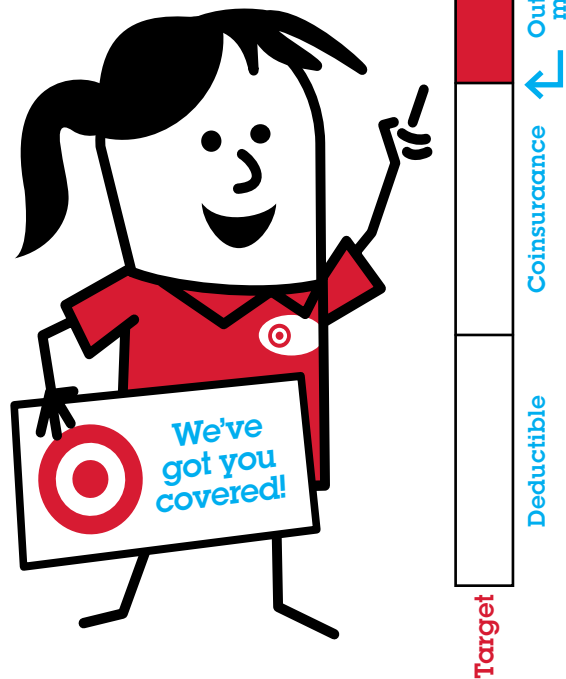


HOW DOES AN ACCOUNT-BASED PLAN WORK? *(continued)*

Account-based plans provide coverage in three steps: *(continued)*

3) Out-of-pocket maximum:

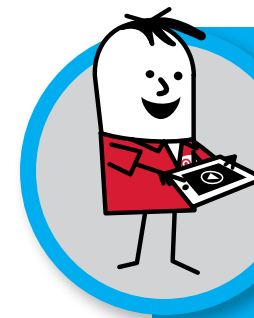
Few people reach the out-of-pocket maximum, but if you do, it's good to know that Target protects you financially by paying 100 percent of your eligible expenses after you reach your out-of-pocket maximum for the plan. Everything you pay (except premiums)—including account dollars—to reach your deductible and cover your coinsurance counts toward this maximum. You can earn account dollars to help you pay your out-of-pocket health care expenses. Simply complete healthy actions through [Well-being Rewards](#), April 1, 2017 through March 31, 2018.



Unused HRA account dollars roll over year to year as long as you remain enrolled in the HRA Plan. Unused HSA account dollars roll over year to year whether you remain in the plan or not.

Out-of-pocket maximums for individuals

Due to Affordable Care Act (ACA) requirements, no individual can pay more out-of-pocket for their individual care than \$7,150 in either the HRA or HSA Plan. This is sometimes referred to as an embedded out-of-pocket maximum. For example, if you elect Family coverage in the HRA, the plan's out-of-pocket maximum is \$7,800. But if you or any other covered individual reaches \$7,150, the remainder of that individual's care will be paid 100 percent by the plan.



WATCH THE VIDEO

Click here to watch the [How Account-Based Plans Work Video](#).

The video uses real-life examples to show how the plan works.

HOW ARE THE HRA AND HSA PLANS DIFFERENT?

The two main differences between the HRA and the HSA Plans are **how you pay for the medical care you receive** and **how you pay for prescription drugs**. ➤ [See the details.](#)

If you enroll in the HRA Plan:

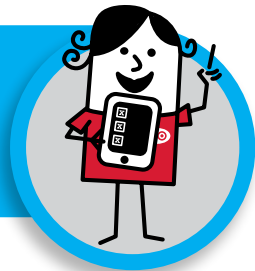
- **You pay more out of every paycheck, but you have a lower deductible.**
This means that you move to the coinsurance phase of the plan sooner.
- **You cannot add your own money to your HRA.**
 - Any unused dollars earned through [Well-being Rewards](#) roll over to the following plan year if you remain enrolled in the HRA Plan.
 - If you have account dollars available, eligible medical expenses are automatically paid from your account.
 - If you leave Target, any remaining dollars go back to Target.
 - You cannot use account dollars to pay for pharmacy, dental or vision expenses.
- **You have a copay for prescription drugs.**
 - You cannot use account dollars to pay the copay.
 - The copay does not apply to your deductible.
 - The copay does apply to your out-of-pocket maximum.

If you enroll in the HSA Plan:

- **You pay less out of every paycheck, but you have a higher deductible,**
so it may take you longer to move to the coinsurance phase of the plan.
- **You can add your own money to your HSA.**
 - Your contributions are made before tax, which lowers your income tax.
 - You own the account. The dollars roll over to the following plan year and are yours to keep if you leave Target or change plans.
 - The account earns interest tax-free, and you can choose to invest your account dollars once your balance reaches \$2,100.
 - You choose whether to use your account dollars now (using the HSA debit card) or save for future medical expenses (even those in retirement).
 - Account dollars can be used to pay for medical, pharmacy, dental and vision expenses.*
- **You pay the full cost of prescription drugs until you reach your deductible.**
 - You can use account dollars to pay for your prescription drugs.
 - The expenses are applied to your deductible and out-of-pocket maximum.

NEED HELP DECIDING?

Take an [Interactive Quiz](#) to get suggestions.



WATCH THE VIDEO

Click here to watch the [Team Members Talk: Health Video](#).



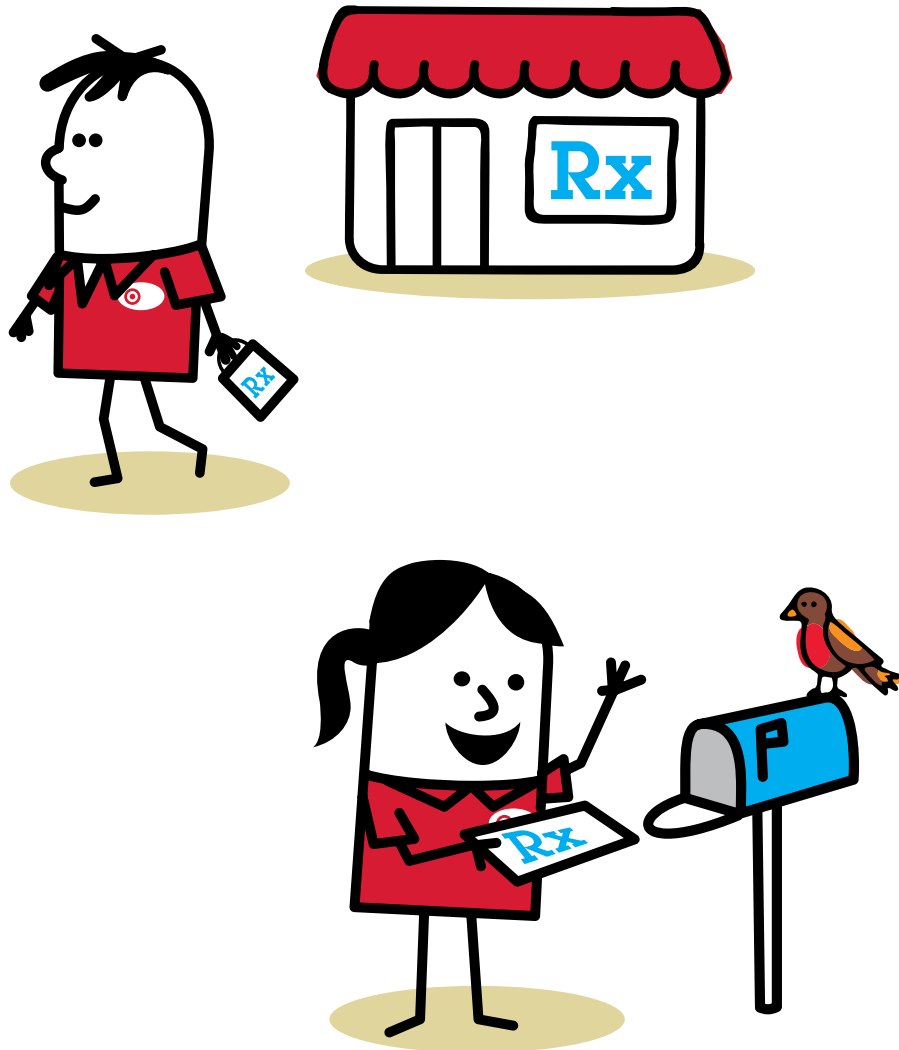
*The IRS has restrictions on using Health Savings Account dollars to cover non-tax dependents, such as adult children and domestic partners. Contact your tax advisor with questions.

The chart below applies to in-network care only. Out-of-network care costs will be higher.

		HRA Plan	HSA Plan
Premiums*	Team Member	\$1,259.96 annually (\$48.46 biweekly, \$23.77 weekly)	\$612.04 annually (\$23.54 biweekly, \$11.55 weekly)
	Team Member + Child(ren)	\$2,862.08 annually (\$110.08 biweekly, \$54.00 weekly)	\$1,604.20 annually (\$61.70 biweekly, \$30.27 weekly)
	Team Member + Spouse/DP	\$4,653.48 annually (\$178.98 biweekly, \$87.80 weekly)	\$2,718.04 annually (\$104.54 biweekly, \$51.28 weekly)
	Family	\$5,256.68 annually (\$202.18 biweekly, \$99.18 weekly)	\$3,230.24 annually (\$124.24 biweekly, \$60.95 weekly)
Account dollars Earn your account dollars through Well-being Rewards from April 1, 2017 to March 31, 2018.	Team Member	\$500	
	Team Member + Child(ren)	\$650	
	Team Member + Spouse/DP	\$1,000	
	Family	\$1,000	
Deductible	Team Member	\$1,050	\$2,850
	Team Member + Child(ren)	\$1,600	\$3,800
	Team Member + Spouse/DP	\$2,250	\$5,150
	Family	\$2,250	\$5,150
Coinsurance		In-network provider: Target pays 80% and you pay 20%	
Out-of-pocket maximum No individual will pay more than \$7,150 during the plan year.	Team Member	\$3,800	\$5,150
	Team Member + Child(ren)	\$5,700	\$7,200
	Team Member + Spouse/DP	\$7,050	\$9,150
	Family	\$7,800	\$9,750
Prescription drugs		Maximum copays for a 30-day prescription:** • Generic: \$8 • Preferred brand: \$42 • Specialty: \$90 • Non-preferred brand: \$90	After deductible is reached, you pay: • Generic: 20% • Preferred brand: 30% • Specialty: 35% • Non-preferred brand: 50%

*View your specific biweekly premiums during the enrollment process, including those for Kaiser Permanente. These premiums do NOT include the tobacco surcharge. The \$390 tobacco surcharge will apply to the team member and spouse/domestic partner, if a tobacco-use status is indicated. One \$390 surcharge will apply to any dependents age 18+ indicated as a tobacco user, regardless of how many dependents are tobacco users.

**Remember that your prescription drug copays do not apply to your deductible in the HRA Plan. You cannot use your HRA dollars to pay for prescription drug copays.



WHAT PHARMACIES CAN I USE?

CVS/caremark is the pharmacy benefits manager for all UnitedHealthcare* plans offered by Target. This means that CVS/caremark will be the name on your pharmacy card, and you will likely receive communications from them about updates to your pharmacy benefit from time to time.

In most cases, you can fill your prescriptions at any in-network pharmacy, whether that's a brick-and-mortar location or through mail order. CVS Pharmacies are included in that network, but they aren't the only pharmacies that are available to you.

If you or someone on your plan takes an ongoing prescription or maintenance medication, it will need to be filled or refilled in a 90-day supply either at a CVS Pharmacy or via the CVS/caremark Mail Order Pharmacy.

For additional questions about covered prescriptions, in-network pharmacies or 90-day refills, call CVS/caremark at **800-842-0376**.

*OptumRx is the pharmacy benefits manager for the Kaiser HRA Plan.

HOW CAN I MANAGE MY HEALTH CARE COSTS?

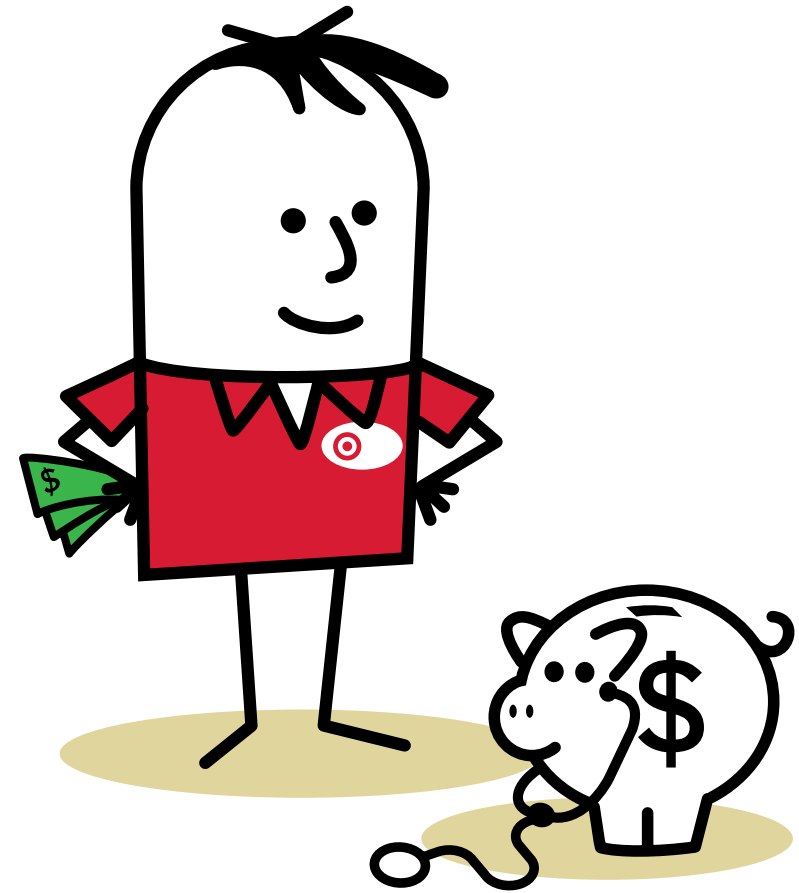
Everyone knows that treating a major illness or injury means there will be medical expenses. But that's not all. Recovering from an illness or surgery can also lead to increased non-medical costs, such as child, elder or pet care, additional transportation needs and more. Supplemental medical plans offer valuable options for additional financial protection at group rates. This means it is likely more affordable than you would find purchasing this coverage on your own.

Supplemental Medical coverage offers protection by providing funds to help pay your medical and non-medical expenses and other unplanned costs that arise when an unexpected illness or injury strikes. If you are enrolled in one of these plans and need to utilize the benefit, the payout comes directly to you so you can use the money to help yourself in whatever way you need.

You do not need to be enrolled in a Target medical plan to sign up for Supplemental Medical coverage, and these plans do not interfere with your primary medical plan.

Choose coverage that is right for you. Each can be elected individually, or you can enroll in two or all three of the benefits described on the next page.

NOTE: Enrolling in the Accident, Hospital Indemnity or Critical Illness plans does not satisfy the Affordable Care Act's requirement to have qualifying health care coverage.



HOW CAN I MANAGE MY HEALTH CARE COSTS? *(continued)*

Allstate is the vendor for these three benefits. The premiums are available online during the enrollment process. You can find [more details](#) here.

Critical Illness Insurance

A serious illness can strike at any time. If you are diagnosed with a covered condition, Critical Illness Insurance pays the full benefit directly to you and does not interfere with your medical plan. A covered team member would receive \$10,000, and a covered spouse/domestic partner/dependent would receive \$5,000. Plus, you can cover your dependent children at no extra cost. Use the benefit any way you choose, including to pay deductibles and coinsurance, but also for unexpected child care or travel costs for family coming to be by your side.

Some of the covered conditions include:

- Heart Attack
- Stroke
- Coronary Artery Bypass
- Cancer
- Major Organ Transplant
- End-Stage Renal (Kidney) Failure

Hospital Indemnity Insurance

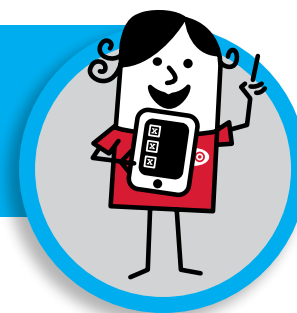
A trip to the hospital—whether planned (to have a baby or a scheduled surgery) or unexpected (due to an accident or serious illness)—is expensive. If you have a hospital visit, Hospital Indemnity Insurance pays the full benefit directly to you. You can use the benefit any way you want, including to pay deductibles, coinsurance, travel or expenses your family incurs to be by your side. You would receive \$1,250 for the first day of your hospital admission, and the remaining benefit you would receive is based on the length of your hospital stay. The benefit can be used throughout the plan year for additional hospital stays.

Accident Insurance

Accident Insurance helps provide financial protection in the event of an accident, including broken bones or sprains from participating in recreational sports. If you have an accident, Accident Insurance pays the full benefit directly to you and does not interfere with your medical plan. You can use the benefit any way you want—to pay deductibles, coinsurance, child care or transportation and lodging expenses while being treated. The amount of the benefit is based on the specific services you receive.

GET A SUGGESTION

[Choose your own adventure](#) to see how these benefits might help with medical costs.



Your teeth and eyes are an important part of your overall health! Be sure to think beyond a medical plan to keep your vision and oral health protected.

WHICH DENTAL PLAN IS RIGHT FOR ME?

You may choose between two dental plans administered by Delta Dental—**Standard** and **Enhanced**. Here's how they compare:

	Standard	Enhanced
Regular Preventive Services	100%	
Basic Services: Includes fillings, basic dental work repair and basic oral surgery	50%	80%
Major Services: Includes oral bridges, dentures, crowns and root canals	50%	80%
Orthodontia Services: Includes diagnostic procedures (such as X-rays, casts and treatment plans) and braces	No coverage	50%, up to a lifetime \$1,500 maximum
Annual Maximum: This is the most the plan will cover in 2017	\$1,500	\$2,500

Dental Paycheck Deductions

	Standard	Enhanced
Team Member	\$130.52 annually (\$5.02 biweekly, \$2.46 weekly)	\$248.04 annually (\$9.54 biweekly, \$4.68 weekly)
Team Member + Child(ren)	\$311.48 annually (\$11.98 biweekly, \$5.88 weekly)	\$563.68 annually (\$21.68 biweekly, \$10.64 weekly)
Team Member + Spouse/DP	\$346.32 annually (\$13.32 biweekly, \$6.53 weekly)	\$616.20 annually (\$23.70 biweekly, \$11.63 weekly)
Family	\$609.96 annually (\$23.46 biweekly, \$11.51 weekly)	\$1,059.24 annually (\$40.74 biweekly, \$19.99 weekly)

WHAT ABOUT MY EYES?

When you enroll in a Target medical plan, you automatically receive the **Vision Exam Plan**. There is no additional enrollment required, and you do not pay an additional premium.

- EyeMed is the vision administrator for all UHC plans. Kaiser Permanente administers its own vision exam plan.
- The plan pays **100 percent of the cost of one eye exam each plan year after a \$10 copayment**, as long as you see an in-network provider. The copayment is waived for exams given to children 18 or younger.

Do you wear glasses or contact lenses?

Consider enrolling in the **Vision Eyewear Plan**. This plan provides a \$150 allowance to help cover the cost of glasses or contacts purchased from an in-network provider.

- You must be enrolled in a UnitedHealthcare medical plan to be eligible for the eyewear plan.
- Your level of Vision Eyewear Plan coverage does not have to be the same as your medical plan coverage level. For example, if only you wear glasses, you can choose Team Member Only coverage for this plan, and Family coverage for the medical plan.

Vision Paycheck Deductions

	Vision Eyewear Plan
Team Member	\$62.40 annually (\$2.40 biweekly, \$1.18 weekly)
Team Member + Child(ren)	\$127.40 annually (\$4.90 biweekly, \$2.40 weekly)
Team Member + Spouse/DP	\$170.04 annually (\$6.54 biweekly, \$3.21 weekly)
Family	\$204.36 annually (\$7.86 biweekly, \$3.86 weekly)

HOW CAN I GET AND STAY HEALTHY?

There's much more to your health well-being than just your health plan.

Treatment Decision Support

When you need help understanding your treatment options for things like back and knee pain, cancer or obesity, you can access licensed nurses as part of your health plan.

Getting a Second Opinion

Get a second opinion on any medical advice from Grand Rounds. This free service offers you and your enrolled dependents access to the country's top specialists for a second opinion to make sure you get the right diagnosis and best treatment plan possible.



Considering Surgery?

BridgeHealth provides access to high-quality health care for surgery or other procedures while saving you out-of-pocket costs. In the HRA Plan, your surgery costs are waived entirely. In the HSA Plan, you'll pay your deductible, and then all other out-of-pocket surgery costs are waived. BridgeHealth offers you access to Centers of Excellence, coverage for certain travel costs, a care coordinator, and access to education and resources. This benefit is not available to Kaiser members.



More information about all of these programs can be found on targetpayandbenefits.com.

Quit For Life®

Target offers free access to the Quit For Life program, which includes individualized phone-based coaching and online support to help [tobacco users](#) quit.

Team Member LifeResources

Team Member LifeResources offers free resources and support on a wide range of topics, including mental health, substance abuse, child and eldercare, legal concerns, financial stress and work/life balance. All team members, their dependents and any household members can access Team Member LifeResources including five free counseling sessions per year.

NurseLine

Not sure whether you need to visit a doctor, urgent care clinic or a convenience care clinic? As part of your health plan, you can call the number on the back of your ID card to be connected to specially trained health professionals such as a nurse or health coach to answer questions.

Wellness Discounts

Save an additional 20 percent off fresh and frozen fruits and veggies and all Simply Balanced and C9 products at Target stores and target.com! This ongoing discount is automatically applied by scanning a Team Member Discount card at checkout. Savings are in addition to the 10 percent team member discount and 5 percent REDcard savings!



MAKE IT EVEN EASIER.
Get the targetpayandbenefits.com app.
Search for UPOINT.

HOW CAN I SAVE MONEY AND LOWER MY TAXES?

There are many ways to set aside before-tax dollars from each paycheck to help you pay for eligible health and dependent care expenses, and lower your income tax at the same time.

- **If you enroll in the HRA, participate in the Health Care Flexible Spending Account (FSA).**
 - You can set aside up to \$2,600 before-tax dollars each year, which lowers your income tax.
 - You will have money set aside to pay out-of-pocket health care costs, in addition to the account dollars you earn through [Well-being Rewards](#). Remember to estimate the amount you set aside carefully. As long as you remain eligible for the Health Care FSA, you will be able to roll over up to \$500 from your Health Care FSA into the next plan year. All other unused dollars will be lost.
 - The Health Care FSA can also be used for prescriptions and eligible dental and vision costs.
 - The account comes with an easy-to-use debit card. If you are enrolling in the Health Care FSA for the first time, you will receive more information about the debit card after enrollment.

Note: You do not need to be enrolled in a Target medical plan to enroll in the Health Care FSA.



HOW CAN I SAVE MONEY AND LOWER MY TAXES? *(continued)*

- **If you enroll in the HSA, make additional before-tax contributions to your HSA.**
 - You can contribute up to \$3,400 before-tax dollars for 2017 if you have Team Member Only coverage, and \$6,750 if you have any other level of coverage. If you are age 55 or older, you are allowed to contribute an additional \$1,000 per year. Well-being Rewards account dollars contributed by Target count toward the annual contribution limit.
 - Money in the account earns interest from day one, and you can choose to invest your account dollars once your balance reaches \$2,100.
 - You own the account. You choose whether to use your account dollars now using a HSA debit card or save for future medical expenses, even in retirement. Dollars roll over to the following plan year and are yours to keep if you leave Target.
 - You can use your HSA to pay for eligible medical, pharmacy, dental and vision expenses.
- **If you enroll in the HSA, consider participating in a Limited Use FSA only if you have contributed as much as possible to your HSA.**
 - A Limited Use FSA cannot be used to pay for medical or pharmacy expenses until you meet your annual deductible.
 - It can be used to pay for eligible dental and vision expenses.
 - Remember, you may be able to roll over up to \$500 from your Limited Use FSA into the next plan year, as long as you remain eligible for the plan. All other unused dollars will be lost.
- **If you pay for daycare for dependents, participate in the Daycare Flexible Spending Account (FSA).**
 - You can set aside up to \$5,000 before-tax dollars per household each calendar year.
 - Eligible expenses include daycare for your children or eligible adult dependents.
 - Unused Daycare FSA dollars cannot be rolled over at the end of the plan year.

HOW CAN I SAVE FOR RETIREMENT?

The TGT 401(k) can help you achieve your financial goals now and in the future.

Target will match your contributions, dollar-for-dollar, up to 5 percent of your pay, plus you are immediately 100 percent vested in the company match. This means it is yours to keep. **If you aren't already saving 5 percent of your pay—you are leaving money on the table!**

You choose:

- **How much to contribute.**

You can contribute from 1 to 80 percent of your pay. You can change the percentage of pay that you contribute to the TGT 401(k) at any time.

- **When a portion of your pay will be taxed.**

You can make before-tax contributions, Roth contributions, after-tax contributions or a combination of all three.

- **How to invest your plan contributions and earnings.**

There are 18 different investment funds with different investment goals and risks. If you are a first-time investor who doesn't feel comfortable customizing your own portfolio, or simply don't have time to review your investments, you may want to choose a LifePath® fund. These funds combine stocks and bonds in different percentages based on the fund's target year. Simply select the one LifePath® fund closest to your retirement date.



HOW CAN I SAVE FOR RETIREMENT? *(continued)*

You can get help managing your retirement money in three ways:

- **Automatic Increase**

Studies show, and financial analysts agree, that many people are not saving enough now to help prepare for retirement. You should be putting at least 10 percent of your money into a retirement account, like the TGT 401(k). To help you move toward that goal, the TGT 401(k) has an automatic increase option. If automatic increase is enabled, your personal contributions will increase each year until your goal percent is reached. You can turn this feature off or change the amount you're contributing at any time.

- **Online Advice**

Online Advice from Financial Engines provides a personalized forecast showing what your investments may be worth when you retire. You can fine-tune your retirement strategy by exploring different contribution rates, risk levels and goals. Financial Engines will even give you specific investment recommendations for your TGT 401(k) that you can apply to your account. There is no fee for using this service.

- **Professional Management**

This program provides professional management of your retirement account for a fee. Financial Engines selects a mix of investments based on your age, risk tolerance and retirement goals. Your investments are reviewed monthly and are updated as markets change and you get closer to retirement.

You must be age 18 or older with 1,000 hours of service to be eligible for the TGT 401(k) plan.

Learn more and access tools on targetpayandbenefits.com.



WATCH THE VIDEO

Click here to watch the [Team Members Talk: 401\(k\) Video](#).

HOW DOES TARGET HELP PROTECT MY FINANCIAL SECURITY?

Recent research found that 41 percent of U.S. employees are anxious about their finances. This anxiety has a dramatic impact on an individual's overall well-being and can even impact your physical health.

Target provides a number of resources to help protect and improve your financial security.

Long-term Disability

Would you be able to pay your bills if you couldn't work for an extended period of time? The Long-term Disability (LTD) plan provides a percentage of your pay if you can't work because you are sick or injured.

Target thinks LTD coverage is so important to our team's financial well-being that we automatically enroll newly eligible team members.

Long-term Disability premiums are paid by deductions from your paycheck based on your age and current salary.

Life Insurance

Life Insurance helps protect beneficiaries against financial loss in the event of a death. Most team members receive company-paid coverage equal to 1 times their annual pay. Eligible team members may also purchase additional Supplemental Life Insurance coverage up to 8 times their annual pay. Supplemental Life Insurance is life insurance coverage that is in addition to Target-paid coverage. You can also purchase Dependent Life Insurance for spouses/domestic partners and/or eligible children.

If you do not enroll in Supplemental or Dependent Life Insurance when you first become eligible, Evidence of Insurability (which might include a physical) will be required to get coverage later, and if you have certain medical conditions, you may not be able to get coverage. This is not required for children.

- Once enrolled in the plan, team members can increase their coverage by 1 times without Evidence of Insurability up to 6 times coverage at Open Enrollment.
- Team members may purchase 7 or 8 times their annual pay. These levels of Supplemental Life Insurance always require Evidence of Insurability, even if you are newly eligible.

Do you know who is going to get your money?

Your beneficiary information is used to determine how your benefits, such as a 401(k) balance or life insurance, will be paid to your survivors in the event of your death. Missing information could delay or prevent the payment of your benefits to your desired loved ones during an already difficult time. Take the opportunity to review your beneficiaries while enrolling online.

HOW DOES TARGET HELP PROTECT MY FINANCIAL SECURITY? *(continued)*

Identity Theft Protection

In the event that your identity is compromised, this coverage offers you peace of mind. Full-service Identity Theft concierge support from InfoArmour provides the following features at a lower rate than you would find on your own:

- Option for Team Member Only or Family coverage
- Identity and tri-bureau credit monitoring alerts to uncover fraud quickly
- An annual credit report and a score each month, making it easier to monitor your credit
- Expanded data sources for transactions on financial accounts
- Additional proactive alerts on financial account transactions
- SocialArmor—social media reputation monitoring to protect against cyberbullying and reputational damage within social media sites
- WalletArmor—digital wallet storage for securely storing documents and credit cards with a lost wallet replacement service
- PasswordArmor—a secure password management solution that automatically saves and syncs your passwords
- An easy-to-read Digital Exposure report that summarizes what a deep Internet search discovers about you
- Full-Service Identity Remediation with a dedicated Privacy Advocate®
- \$1,000,000 Identity Theft Insurance Policy

Unlike identity theft coverage under the Group Legal plan, Identify Theft Protection is proactive, which means they are monitoring for theft before it happens, in addition to helping you resolve it if it does happen.



HOW DOES TARGET HELP PROTECT MY FINANCIAL SECURITY? *(continued)*

Group Legal Plan

Enroll to get access to legal representation from a large network of lawyers at an affordable price. You pay nothing additional for a broad array of services. These services include: family law, wills and estates, debt-related matters, identity theft, real estate, traffic and criminal, and personal injury.



Target Credit Union

As a Target team member, you are eligible to join the Target Credit Union. Because of its relationship with Baxter Credit Union, one of the top 100 Credit Unions in the U.S., team members across the country can take advantage of the many benefits it offers, including:

- Free ATMs
- Excellent loan rates
- Student loan consolidation
- Rainy Day Savings™
- And more—check out www.targetcu.org!



WATCH THE VIDEO

If you haven't already, click here to watch the [Team Members Talk: Favorite Benefits Video](#).

WELL-BEING REWARDS/RALLYSM

It's time to Rally!

Rally, a digital health experience, is available to **all team members!** Rally offers:

- A fun and engaging health survey which will reveal your Rally Age, a measure of your overall health.
- Personalized recommendations to help you improve or maintain your healthy habits, including healthy financial habits.
- The opportunity to cash in! As you engage with the site, you earn virtual Rally Coins that you can use to enter sweepstakes for chances to win awesome stuff. The more you do on Rally, the more chances you'll have to win!

Enrolled in a Target medical plan? You can earn your Well-being Rewards account dollars on Rally.

The Well-being Rewards program period aligns with the benefits plan year. Access the Rally site from April 1, 2017 through March 31, 2018 to complete your 2017 Well-being Rewards activities and earn your account dollars.

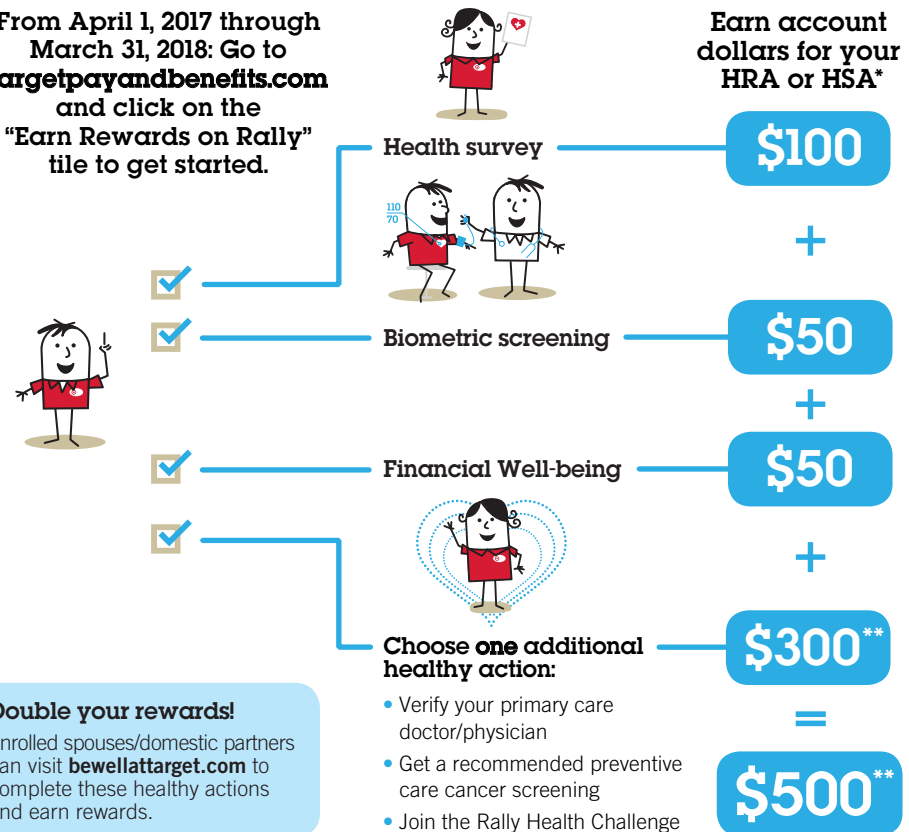
Take Rally's features on the go with the mobile app. Available on iOS and Android.TM



2017 Well-being Rewards

From April 1, 2017 through March 31, 2018: Go to **targetpayandbenefits.com** and click on the "Earn Rewards on Rally" tile to get started.

Earn account dollars for your HRA or HSA*



*Hawaii team members will earn up to four \$25 Target GiftCardsTM for completing the healthy actions.

**Those who enroll in Team Member + Child(ren) coverage can earn \$450 for completing one of the additional healthy actions, for a total of \$650 in account dollars.

WHO IS ELIGIBLE FOR BENEFITS?

Team Members

Your eligibility for benefits is based on your position, average hours and time with Target. You can view your eligibility at targetpayandbenefits.com during the enrollment process.

If you are an hourly team member, your benefits eligibility is reviewed each year before the beginning of the plan year. Based on this annual review, your benefits eligibility could change for the next plan year. Average hours are calculated using the previous 12 months. To view your average hours throughout the year, go to **Pay & Benefits** on eHR or **insideTGT**, click **My Pay** and then click **View Pay Statement**.

Dependents

Enrolling ONLY eligible dependents keeps costs down for all of us. Eligible dependents to cover under Target medical, supplemental medical and/or dental plans include:

- **Legal spouses.** If you are legally divorced, your ex-spouse is not eligible but may be able to elect COBRA. COBRA stands for the Consolidated Omnibus Budget Reconciliation Act. It gives employees the right to pay premiums for and keep the group health insurance that they would otherwise lose.
- **Domestic partners.** You and your domestic partner must certify your committed relationship at the time of enrollment.
- **Dependent children until age 26.** This includes:
 - Biological children, legally adopted children, children placed with you in anticipation of adoption, stepchildren, foster children and children of your domestic partner.
 - Grandchildren who are unmarried, live with you and depend on you for principal support, and are the child(ren) of your unmarried covered dependent child.
- **Disabled dependents.** These dependents are age 26 or older, depend on you for principal support, and are approved for Social Security Disability Insurance (SSDI).

To enroll an eligible dependent in a Target medical plan, you will be asked to provide his or her Social Security number. If you enroll dependents who are not eligible, Target has the right to remove coverage and may take disciplinary action against you, up to and including termination.

To verify a marriage or domestic partnership, you will need to provide two documents that confirm:

- 1) The start of a marriage or domestic partnership, such as a marriage certificate or domestic partnership affidavit, **and**
- 2) That the relationship is still current by submitting documents that show joint status, such as a tax return, credit card statement, bank statement or lease agreement.

To verify a child dependent, you will need to provide proof of the parent-child relationship, such as a birth or adoption certificate.

To verify a disabled dependent, you must provide proof that the child is disabled, and you must notify Target within 31 days after the disability or dependency ends.

You'll find details about the dependent verification process on the **Submitted Successfully** page after you enroll.

WHAT ARE THE PREMIUMS?

Premiums are the fees taken directly out of your paycheck before taxes to help cover the cost of your benefits coverage.

The premiums shown here appear elsewhere in the guide with the information about the particular benefit. They are presented here together for your convenience.

Medical*

	HRA Plan	HSA Plan
Team Member	\$1,259.96 annually (\$48.46 biweekly, \$23.77 weekly)	\$612.04 annually (\$23.54 biweekly, \$11.55 weekly)
Team Member + Child(ren)	\$2,862.08 annually (\$110.08 biweekly, \$54.00 weekly)	\$1,604.20 annually (\$61.70 biweekly, \$30.27 weekly)
Team Member + Spouse/DP	\$4,653.48 annually (\$178.98 biweekly, \$87.80 weekly)	\$2,718.04 annually (\$104.54 biweekly, \$51.28 weekly)
Family	\$5,256.68 annually (\$202.18 biweekly, \$99.18 weekly)	\$3,230.24 annually (\$124.24 biweekly, \$60.95 weekly)

*View your specific biweekly premiums during the enrollment process, including those for Kaiser Permanente. These premiums do NOT include the tobacco surcharge. The \$390 tobacco surcharge will apply to the team member and spouse/domestic partner, if a tobacco-use status is indicated. One \$390 surcharge will apply to any dependents age 18+ indicated as a tobacco user, regardless of how many dependents are tobacco users.

[How does using tobacco affect my medical plan costs?](#)

Dental

	Standard	Enhanced
Team Member	\$130.52 annually (\$5.02 biweekly, \$2.46 weekly)	\$248.04 annually (\$9.54 biweekly, \$4.68 weekly)
Team Member + Child(ren)	\$311.48 annually (\$11.98 biweekly, \$5.88 weekly)	\$563.68 annually (\$21.68 biweekly, \$10.64 weekly)
Team Member + Spouse/DP	\$346.32 annually (\$13.32 biweekly, \$6.53 weekly)	\$616.20 annually (\$23.70 biweekly, \$11.63 weekly)
Family	\$609.96 annually (\$23.46 biweekly, \$11.51 weekly)	\$1,059.24 annually (\$40.74 biweekly, \$19.99 weekly)

Vision

	Vision Eyewear Plan
Team Member	\$62.40 annually (\$2.40 biweekly, \$1.18 weekly)
Team Member + Child(ren)	\$127.40 annually (\$4.90 biweekly, \$2.40 weekly)
Team Member + Spouse/DP	\$170.04 annually (\$6.54 biweekly, \$3.21 weekly)
Family	\$204.36 annually (\$7.86 biweekly, \$3.86 weekly)

Other Benefits

The premiums for other benefits (such as Long-term Disability, additional Life Insurance, Supplemental Medical benefits, Group Legal and more) are shown online at the time of enrollment.

DOES USING TOBACCO AFFECT MY BENEFIT COSTS?

You must verify your tobacco-use status, or you will automatically default to a tobacco user and pay the tobacco surcharge and higher premiums for benefits including Long-term Disability, Life Insurance and some Supplemental Medical plans. Tobacco use includes tobacco in any form (including e-cigarettes).

- **The \$390 tobacco surcharge will apply to the team member and spouse/domestic partner if they indicate their tobacco status as tobacco user on the medical plan.** One \$390 surcharge will apply to any dependents age 18+ who indicate their tobacco status as a tobacco user on the medical plan, regardless of how many dependents are tobacco users.
- **You can change your tobacco-use status once you are tobacco-free for six months,** which may be verified through a voluntary tobacco/nicotine test. Or you can complete the Quit For Life program outlined below.
- **What is Target doing to help me and my family stop using tobacco?** Target offers free access to the Quit For Life program for all team members and medically enrolled dependents. The program provides individualized phone-based coaching and online support to help tobacco users quit. To learn more, visit targetpayandbenefits.com.



WHERE CAN I LEARN MORE?

If you have questions about your benefits, the best place to find answers is targetpayandbenefits.com—your one-stop shop for all benefits information. Start with the **Plan Information** page. It's found under **Plan Details** on the **Health & Insurance** tab. You also may call the Target Benefits Center at **800-828-5850**. Additional detailed information about your benefits can be found in the following locations:

If you have a question about...	You should contact...
<ul style="list-style-type: none"> ▪ HRA and HSA Plans ▪ Locating in-network doctors and hospitals ▪ Preventive care ▪ Treatment decision support 	<p>UnitedHealthcare 888-444-4314 myhealthcareview.com</p> <p>Kaiser Permanente Colorado: 877-883-6698 Georgia: 866-800-1486 Mid-Atlantic: 877-740-4117 Northwest: 866-800-3402 Northern CA: 800-663-1771 Southern CA: 800-533-1833 kp.org</p>
<ul style="list-style-type: none"> ▪ Earning your Well-being Rewards 	<p>Well-being Rewards Customer Support 855-491-8780 Click the Earn Rewards on Rally tile on targetpayandbenefits.com</p>
<ul style="list-style-type: none"> ▪ Your HSA 	<p>Optum Health Bank 866-234-8913</p>
<ul style="list-style-type: none"> ▪ Surgery Care Coordinator 	<p>BridgeHealth 888-387-3910</p>
<ul style="list-style-type: none"> ▪ Second Opinion 	<p>Grand Rounds 844-870-4563 grandroundshealth.com/target</p>
<ul style="list-style-type: none"> ▪ Supplemental Medical plans: Critical Illness, Hospital Indemnity or Accident Insurance 	<p>Allstate 888-282-2560</p>

If you have a question about...	You should contact...
<ul style="list-style-type: none"> ▪ Prescriptions ▪ Finding an in-network pharmacy 	<p>CVS/caremark 800-842-0376 Kaiser Permanente See contact information on the left</p>
<ul style="list-style-type: none"> ▪ Dental plans ▪ Locating an in-network dentist 	<p>Delta Dental 800-493-0513 deltadentalmn.org/tgt</p>
<ul style="list-style-type: none"> ▪ Vision plan ▪ Locating in-network providers 	<p>EyeMed Vision Care 855-653-6226 www.eyemed.com NOTE: Kaiser administers their Eye Exam Plan</p>
<ul style="list-style-type: none"> ▪ If or where you should see a doctor 	<p>UHC NurseLine 888-444-4314</p>
<ul style="list-style-type: none"> ▪ Extra support or referrals 	<p>Team Member LifeResources 877-616-0510 Click the Access Team Member LifeResources tile on targetpayandbenefits.com</p>
<ul style="list-style-type: none"> ▪ Flexible Spending Accounts 	<p>Your Spending Account™ 800-828-5850 targetpayandbenefits.com</p>

Notice of Special Enrollment Rights for Medical Coverage

If you are declining coverage and have a new dependent later in the plan year (through marriage, birth, adoption or placement for adoption), you may be able to enroll yourself and your dependents.

However, you must request enrollment within 31 days* after adding new dependents. This includes enrolling new dependents in your current plan or changing to a different plan offered by Target.

If you are declining coverage for yourself or your dependents because of other health care coverage, you may be able to enroll yourself and your dependents at a later date if you or your dependents lose eligibility for that other coverage (or the employer stops contributing toward the coverage). However, you must request enrollment within 31 days* after the other coverage ends or the employer stops contributing.

To request special enrollment or more information:

- Go to targetpayandbenefits.com.
- Call the Target Benefits Center at **800-828-5850** (Monday through Friday, 9 a.m. to 7 p.m. CT).

*Current Children's Health Insurance Program (CHIP) or Medicaid participants losing eligibility under these programs and/or team members and dependents who become eligible for a premium assistance subsidy under CHIP or Medicaid have 60 days from the qualifying event date to enroll.



Supplemental Medical Plans

2017 Plan Overview

This is only a summary. A detailed explanation of benefits can be found in the 2017 plan year Summary Plan Description (SPD). The SPD is available to view at www.targetpayandbenefits.com. Call Allstate Benefits with questions regarding covered and non-covered services. In the event of conflict with these materials, your SPD will control.

Critical Illness Insurance

Target offers critical illness insurance for its team members, their spouse or domestic partner, and children. Critical illness insurance helps protect against financial loss in the event you or an eligible dependent is diagnosed with a covered critical illness, subject to any exceptions. Below is a sample of some of the benefits available (please see the SPD for complete information):

Critical Illness Coverage Amount <i>Heart attack, stroke, end stage renal failure, major organ transplant, bone marrow transplant, paralysis, coronary artery by-pass surgery</i>	
Team Member	\$10,000
Spouse/Domestic Partner	\$5,000
Dependent Children	\$5,000

Reoccurrence of Critical Illness: same amount as above

Cancer Critical Illness Coverage Amount <i>Carcinoma in Situ, Invasive Cancer, Skin Cancer</i>		
Team Member	\$10,000	\$250
Spouse/Domestic Partner	\$5,000	\$250
Dependent Children	\$5,000	\$250

Reoccurrence of Cancer Critical Illness: same amount as above

Supplemental Critical Illness Coverage Amount <i>Advanced Alzheimer's Disease, Advanced Parkinson's Disease, Benign Brain Tumor, Coma, Complete Loss of Hearing, Complete Loss of Sight, Complete Loss of Speech</i>	
Team Member	\$10,000
Spouse/Domestic Partner	\$5,000
Dependent Children	\$5,000

Specified Disease Critical Illness Coverage Amount <i>Adrenal Hypofunction (Addison's Disease); Lou Gehrig's Disease (ALS); Bacterial Meningitis; Cerebral Palsy; Cystic Fibrosis; Diphtheria; Encephalitis; Huntington's Chorea; Legionnaire's Disease; Malaria; Multiple Sclerosis; Muscular Dystrophy; Myasthenia Gravis; Necrotizing Fasciitis; Osteomyelitis; Poliomyelitis; rabies; scleroderma; severe burns; sickle cell anemia; systemic lupus; tetanus; tuberculosis</i>	
Team Member	\$10,000
Spouse/Domestic Partner	\$5,000
Dependent Children	\$5,000

Benefits will not be paid for a critical illness that is, or is caused by, contributed to by, or results from:

1. intentionally self-inflicted injury or action;
2. illegal activities or participation in an illegal occupation;
3. substance abuse, to include abuse of alcohol, alcoholism, abuse of legally obtained prescription medications; or illegal use of a non-prescribed drug; or
4. the covered person being under the influence of alcohol or any drug, unless administered and taken as prescribed by a physician.

Hospital Indemnity Insurance

Target offers group hospital indemnity insurance for its team members, their spouse or domestic partner and children. All covered persons receive the same benefit amounts. Group Hospital Indemnity coverage is designed to provide supplemental coverage for certain losses related to a hospital confinement, subject to any exceptions.

Hospital Indemnity Insurance	Coverage Amount
First Day Hospital Confinement	\$1,250 per confinement
Daily Hospital Confinement	\$250 per day
Hospital Intensive Care	\$100 per day

Benefits will not be paid for any loss that is, or is caused by, contributed to, or results from:

1. any act of war whether or not declared, participation in a riot, insurrection or rebellion;
2. injury incurred while engaging in an illegal occupation or committing or attempting to commit a felony;
3. dental or plastic surgery for cosmetic purposes except when such surgery is required to: (a) treat an injury; or (b) correct a disorder of normal bodily function;
4. intentionally self-inflicted injury or action;
5. confinement that begins before the covered person's effective date of coverage;
6. the reversal of a tubal ligation or vasectomy;
7. artificial insemination, in vitro fertilization, and test tube fertilization, including any related testing, medications or physician services, unless required by law;
8. participation in any form of aeronautics (including parachuting and hang gliding) except as a fare-paying passenger in a licensed aircraft provided by a common carrier and operating between definitely established airports;
9. a newborn child's routine nursing or routine well baby care during the initial confinement in a hospital;
10. driving in any organized or scheduled race or speed test or while testing an automobile or any motorized vehicle on any racetrack or speedway;
11. mental illness or nervous disorders;
12. alcoholism or drug addiction; or
13. an injury that occurred as a result of an on-the-job accident.

Accident Insurance

Target offers group accident insurance for its team members, their spouse or domestic partner and children. All covered persons receive the same benefit amounts. Group Accident coverage is designed to provide coverage for losses resulting from a covered off-the-job accident only, subject to any exceptions. Below is a sample of some of the benefits available (please see the SPD for complete information):

Accident Insurance	Coverage Amount
Initial Hospital Confinement	\$1,500 per accident
Daily Hospital Confinement	\$300 per day
Ground Ambulance	\$250 per accident
Urgent Care	\$125 per accident
Emergency Room Services	\$200 per accident

Benefits will not be paid for any loss that is, or is caused by, contributed to by, or results from:

1. injury incurred prior to the covered person's effective date of coverage subject to the Incontestability provision;
2. any act of war whether or not declared, participation in a riot, insurrection or rebellion;
3. intentionally self-inflicted injury or action;
4. any bacterial infection (except pyogenic infections which shall occur with and through an accidental cut or wound);
5. participation in any form of aeronautics except as a fare-paying passenger in a licensed aircraft provided by a common carrier and operating between definitely established airports;
6. engaging in an illegal occupation or committing or attempting to commit a felony;
7. participating in any organized or scheduled race or speed test, or while testing an automobile or any vehicle on any racetrack or speedway, including BMX racing;
8. hernia, including complications due to hernia;
9. any injury sustained or contracted in consequence of the covered person being under the influence of any drug or substance voluntarily taken through any means, including inhalation, unless administered and taken as prescribed by a physician;
10. an error, mishap, or malpractice during a medical, diagnostic, or surgical treatment or procedure; or
11. an injury that occurred as a result of an on-the-job accident.

Any injury incurred while a covered person is an active member of the Military, Naval, or Air Forces of any country or combination of countries is not covered. Upon notice and proof of service in such forces, we will return the pro-rata portion of the premium paid for any period of such service.

Initial Eligibility

Eligible team members may purchase group critical illness, hospital indemnity and accident insurance. Supplemental medical insurance premiums are paid by the team member through payroll deductions. No Evidence of Insurability (EOI) is required for any covered person.

Portability Continuation Options

Your existing group critical illness, hospital indemnity, and accident insurance is portable. This means you may continue (port) your coverage if your group critical illness, hospital indemnity, or accident insurance terminates due to:

- Retirement
- Termination of employment
- Leave of absence
- Loss of eligibility
- Termination of the group policy

To port coverage, you must complete and return the Portability Election form which can be obtained by calling Allstate Benefits at 888-282-2560. You must return this form to Allstate Benefits within 31 days after your coverage ends. Ported coverage terminates when:

- the covered person again becomes eligible for insurance under the policy; or
- the last day premiums for the ported coverage have been paid, subject to the grace period;
- with respect to insurance for dependents:
 - the date your coverage terminates; or
 - the date your dependent ceases to be an eligible dependent.

For More Information:

Allstate Benefits	888-282-2560	www.targetpayandbenefits.com
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The supplemental health coverage is provided by limited benefit insurance.

This material is valid as long as information remains current, but in no event later than October 21, 2019. The policy has exclusions and limitations and is underwritten by American Heritage Life Insurance Company (Home Office: Jacksonville, FL). Allstate Benefits is the marketing name for American Heritage Life Insurance Company, a subsidiary of The Allstate Corporation.