



Welcome to your
employee benefits.

Zivin Services3



Act Now to Help Protect What Matters Most



The life you're building for yourself and your family is precious. Every financial decision, every first step, every milestone — these are the things that matter. Think of insurance as a financial safety net that can help protect you when life doesn't go as planned. Enrolling in coverage now is a small thing you can do to help make sure you and your loved ones keep moving forward.

In this guide, you'll find details about your group insurance options from The Standard Life Insurance Company of New York and the forms you need to start the application process.



Protection from the Unexpected

Even with medical insurance, a serious illness or accident – or even a routine stay in the hospital – can be a drain on your finances. The following types of insurance pay a benefit to help you pay the bills. Use the payment however you like to cover out-of-pocket medical costs and other living expenses.

Accident insurance pays a lump sum directly to you so you can help cover out-of-pocket expenses as you or a family member recuperates after an accident.

Critical Illness insurance helps you manage expenses during a serious illness, such as a heart attack, stroke or cancer. Use the benefit, paid to you in a lump sum, for deductibles, copays, rent or groceries as you or a family member recovers.

Your Employer-Paid Benefits

- Basic Life and Accidental Death & Dismemberment insurance

Benefits You Can Apply for Now:

- Accident insurance
- Critical Illness insurance
- Additional Life and Accidental Death & Dismemberment insurance



Protection for Your Loved Ones

Life insurance helps provide support and stability to your family if something were to happen to you. It can help your family financially through a difficult time and provide support into the future.

Accidental Death and Dismemberment (AD&D) insurance helps protect against a sudden financial loss brought on by an accidental death. It can also help pay for the high cost of living associated with surviving an accident that results in a severe physical loss.

Group Accident Insurance

Keep your finances on track when an accident happens.

Having an accident doesn't just hurt you — it can also damage your finances. Your medical insurance will cover some of the expenses, but you'll be left to foot the bills for your copays and deductible. Those can add up fast, especially if you're unable to work while you recover. That's where Group Accident insurance comes in: It helps protect your bank account from the out-of-pocket expenses that can come with an injury — whether you're coping with a broken arm or recovering from a serious car accident.

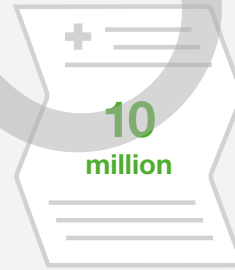
Medical insurance helps — but it doesn't pay for everything.

31 million



Some 31 million people sought care in the emergency room for unintended injuries in 2011.¹

10
million



An estimated 10 million working-aged Americans struggled to pay medical bills in 2013 — even though they had health insurance.²

¹ Source: FastStats, based on National Hospital Ambulatory Medical Care Survey: 2011 Emergency Departure Summary Tables, www.cdc.gov/nchs/fastats/accidental-injury.htm

² Source: NerdWallet Health. In 2013, NerdWallet aggregated multiple sources and data sets to estimate the impact of medical bills on Americans that year.


Don't let an accident stop your financial plans.

Accident insurance is an affordable way to make sure you can cover the gap between what your medical insurance covers and what you'd owe out of pocket if you or a family member were to get injured. It's protection that's also convenient: Your premium payments are deducted directly from your paycheck.

Here's how it works:

In the event of a covered accident, your Accident insurance will pay a benefit directly to you. You can use this money wherever you need it most — whether that’s to help with your deductible, copays and other medical bills, or your daily expenses while you recover.


Let’s say your teenage daughter gets injured during tryouts for her school basketball team and goes to urgent care for treatment. Diagnosis: dislocated elbow and fracture of the forearm and wrist. Although surgery isn’t necessary, she will need follow-up appointments and physical therapy.



You’d get an additional 25% if your child is injured while participating in an organized athletic activity — whether it’s football practice, a soccer game or dance class.

| BENEFITS PAID TO YOU | |
|--|----------------|
| Urgent Care Visit..... | \$50 |
| X-ray..... | \$50 |
| Dislocated Elbow..... | \$800 |
| Arm Fracture..... | \$550 |
| Wrist Fracture..... | \$550 |
| Physician Follow-up Appointment..... | \$50 |
| Physical Therapy Appointment (2 visits)..... | \$100 |
| SUBTOTAL..... | \$2,150 |
| Youth Organized Sports Benefit (25% of subtotal)..... | \$538 |
| Total paid directly to you..... | \$2,688 |

Imagine that you survive a serious car accident. After a trip to the ER, you stay in the hospital for several days while you recover. In the weeks following the accident, you have a follow-up appointment at a clinic in another city and physical therapy.



You’d get an additional \$1,000 because you were injured in a car accident. Because you drove more than 100 miles one way for your follow-up appointment, you’d receive an extra \$150. If your car accident occurred more than 100 miles away from your home and a family member who resides with you traveled to be near you while you were in the hospital, we’d pay additional benefits to help cover lodging expenses.

| BENEFITS PAID TO YOU | |
|---|-----------------|
| Ambulance..... | \$300 |
| Emergency Room Visit..... | \$150 |
| CAT Scan..... | \$200 |
| Hospital Admission Benefit | \$1,000 |
| 5-Day Hospital Confinement (\$200 per day)..... | \$1,000 |
| Right Leg Fracture..... | \$4,000 |
| Knee Cap Fracture..... | \$1,100 |
| Pelvis Fracture..... | \$2,400 |
| Physician Follow-up Appointment..... | \$50 |
| Physical Therapy Appointment..... | \$50 |
| SUBTOTAL..... | \$10,250 |
| Automobile Accident Benefit..... | \$1,000 |
| Transportation Benefit..... | \$150 |
| Lodging (4 days)..... | \$700 |
| Total paid directly to you..... | \$12,100 |

Affordable Group Rates

Because you'll be buying this insurance through Zivin Services3, you'll have access to affordable group rates. You'll also have the convenience of having your premium deducted directly from your paycheck. Your rates will not increase as you grow older — meaning you'll pay the same premium for the life of the policy, even if you continue your coverage after your employment with Zivin Services3 ends (this is known as portability).

It pays to be well-adjusted. If you need to see a chiropractor while you're recovering from an accident, you can get a benefit of \$50 (up to two visits per accident, providing those visits are on different days).

Staying in a hospital can be costly, even with medical insurance coverage. You'll receive a \$1,000 benefit if you're admitted — plus \$200 for every day you're hospitalized.* And if you're admitted or confined to a critical care unit while you're in the hospital, you'll receive additional critical care unit benefits.

If you or a dependent travel at least 100 miles from your or your dependent's place of residence for treatment, you'll receive a Transportation Benefit of \$150 for each day of travel.** We'll pay a \$175 Lodging Benefit per day** if you or a dependent travel at least 100 miles from your or your dependent's place of residence for treatment and you, your dependent or another person incurs a lodging expense.

*Up to 365 days per accident.

**Maximum 30 days per accident; 90 days per year.

| Coverage for... | BiWeekly Premium |
|------------------------------------|------------------|
| You | \$ |
| You and your spouse | \$ |
| You and your children | \$ |
| You, your spouse and your children | \$ |

These are actual benefits you could receive in the event of a covered accident. Benefits are paid once per covered accident unless otherwise noted:

| Emergency Care Benefits | |
|--|-------|
| Ambulance — Air | \$800 |
| Ambulance — Ground | \$300 |
| Emergency Room Visit | \$150 |
| Urgent Care Visit | \$50 |
| Initial Care Visit (not payable if Urgent Care or Emergency Room Visit Benefit is payable) | \$50 |
| Emergency Dental Care — Crown | \$200 |
| Emergency Dental Care — Extraction | \$100 |
| Outpatient X-ray | \$50 |
| Major Diagnostic Exam (such as CT scan, MRI, EEG) | \$200 |
| Transfusion Blood, Plasma or Platelets | \$300 |

| Specific Injury Benefits | |
|--------------------------|---------------------------------------|
| Burns | \$200-\$10,000, depending on severity |
| Coma | \$7,500 |
| Concussion | \$150 |
| Eye Injury | \$200 |
| Lacerations | \$75-\$500, depending on size |
| Skin Graft | 25% of burn benefit |

| Dislocations | Non-surgical/Surgical |
|---|---|
| Ankle, Collarbone (sternoclavicular), Elbow, Foot, Hand, Lower Jaw, Shoulder, Wrist | \$800/\$1,600 |
| Knee (not including kneecap) | \$900/\$1,800 |
| Collarbone (acromioclavicular), Spine | \$400/\$800 |
| Finger, Rib, Toe | \$150/\$300 |
| Hip | \$2,500/\$5,000 |
| Partial Dislocation | 25% of the associated dislocation listed above (non-surgical) |

| Fractures | Non-surgical/Surgical |
|---|--|
| Ankle, Arm (shoulder to elbow), Arm (elbow to wrist), Collarbone, Elbow, Foot, Hand, Kneecap, Lower Jaw, Shoulder Blade, Sternum, Wrist | \$550/\$1,100 |
| Bones of Face, Coccyx, Nose, Vertebrae | \$500/\$1,000 |
| Rib | \$400/\$800 |
| Finger, Toe | \$100/\$200 |
| Hip | \$2,500/\$5,000 |
| Leg (hip to knee) | \$2,000/\$4,000 |
| Leg (knee to ankle), Pelvis, Vertebral Column | \$1,200/\$2,400 |
| Skull (depressed) | \$4,000/\$8,000 |
| Skull (non-depressed) | \$1,500/\$3,000 |
| Chip Fracture | 25% of the associated fracture listed above (non-surgical) |

| Surgical Benefits | |
|--|---------|
| Knee Cartilage (Once per covered accident, regardless of whether one or both knees require repair. If both exploratory and repair surgeries are performed, will pay repair benefit amount) | |
| Exploratory | \$200 |
| Repair | \$750 |
| Tendon, Ligament, Rotator Cuff (If two or more surgeries are required for the same covered accident, will pay the highest benefit amount) | |
| Exploratory | \$200 |
| Repair of one | \$750 |
| Repair of two or more | \$1,000 |
| Ruptured Disc | |
| Repair | \$750 |
| Abdominal/Thoracic Surgery (If more than one surgery required for the same covered accident, will pay the highest benefit amount) | |
| Exploratory | \$200 |
| Laparoscopic Repair Surgery | \$750 |
| Open Repair Surgery | \$1,500 |
| Surgical Facility Benefit | \$150 |

| Hospital Benefits | |
|---|---------------|
| Hospital Admission (once per covered accident) | \$1,000 |
| Daily Hospital Confinement (maximum 365 days per covered accident) | \$200 per day |
| Critical Care Unit Admission* (once per covered accident) | \$750 |
| Daily Critical Care Unit Confinement* (maximum 15 days per covered accident) | \$200 per day |
| Daily Rehabilitation Facility (maximum 90 days per covered accident) | \$100 per day |
| * Payable in addition to any Hospital Admission and/or Daily Hospital Confinement Benefit you may be eligible to receive. | |

| Follow-Up Care | |
|---|------------------------------------|
| Medical Appliance (e.g., wheelchair, cane or brace) | \$100 |
| Chiropractic Care (maximum 2 visits per covered accident, 1 per day) | \$50 per day |
| Physician Follow-up (maximum 2 visits per covered accident, 1 per day) | \$50 per day |
| Hearing Device | \$500 |
| Prosthesis | One: \$500 Two or more: \$1,000 |
| Occupational, Speech or Physical Therapy (maximum 3 visits per covered accident, 1 per day) | \$50 per day |

| Additional Benefits | |
|---|---|
| Lodging (per day, to a maximum of 30 days per covered accident and a total of 90 days per year) | \$175 |
| Transportation (per trip) (per day, to a maximum of 30 days per covered accident and a total of 90 days per year) | \$150 |
| Automobile Accident Benefit | \$1,000 |
| Youth Organized Sports Benefit | Additional 25% of total benefit payable |

Important Details

Here's where you'll find the nitty-gritty details about Accident insurance.

Portability

This coverage is portable. That means that you may be able to continue your coverage through direct bill if your employment ends, the group policy terminates or your insurance ends because you no longer meet the eligibility requirements.

Eligibility Requirements

To be eligible for this coverage, you must be a regular employee of Zivin Services³, actively working in the United States at least 79 hours per month and a citizen or resident of the United States or Canada. Temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible.

You can choose to cover your spouse, a person to whom you are legally married, or your civil union partner or your domestic partner as recognized by law or by your employer's domestic partnership policy, if applicable. You can also cover your children from birth through age 25. Your children cannot be insured by more than one employee. Your spouse or children must not be full-time member(s) of the armed forces. You cannot be insured as both an individual and a dependent.

A minimum number of eligible employees must apply and qualify for the proposed plan before Accident insurance coverage can become effective.

Your Effective Date

You must satisfy the eligibility requirements listed above, serve an eligibility waiting period, agree to pay premium, and be actively at work (able to perform all normal duties of your job) on the day before the scheduled effective date of insurance.

If you are not actively at work on the day before the scheduled effective date of insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

Please contact your human resources representative or plan administrator for more information regarding the requirements that must be satisfied for your insurance to become effective.

Exclusions

Benefits are not payable if an accident is proximately caused by any of the following:

- War or any act of war
- Suicide or other intentionally self-inflicted injury, while

sane or insane

- Committing or attempting to commit a felony or being engaged in an illegal occupation
- Any accident sustained or contracted in consequence of you or your dependent being intoxicated or under the influence of any narcotic, unless administered on the advice of a Physician
- Sickness existing at the time of the accident, including any medical or surgical treatment or diagnostic procedure for a sickness
- Travel or flight in or on any aircraft, except as a fare-paying passenger on a commercial aircraft
- Engaging in mountain climbing, caving, heli-skiing, boxing, full contact martial arts, bungee jumping, base jumping, parachuting, skydiving, hang gliding, sail gliding, parasailing, parakiting, kitesurfing, kiteboarding, or scuba diving
- Practicing for, or participating in, any semiprofessional or professional competitive athletic contests for which any type of compensation or remuneration is received
- Routine eye exams and dental procedures other than a crown or extraction for a tooth or teeth as a result of a covered accident
- Riding in or driving any automobile in a race, stunt show or speed test
- Cosmetic surgery or other procedure to improve appearance, unless it is necessary to correct a deformity or restore bodily function after a covered accident
- Any accident which occurs while you or your dependents are incarcerated in a jail, penal, or correctional institution

When Your Insurance Ends

Your insurance ends if you notify your employer or policyholder to terminate your coverage, you stop making premium payments, your employment terminates, you cease meeting the member definition or the group policy terminates.

Child and spouse insurance ends when your insurance ends, they cease to meet the definition of child or spouse, you stop making premium payments for child or spouse insurance, spouse or child insurance is no longer offered under the group policy or the group policy terminates.

Group Insurance Certificate

If coverage becomes effective and you become insured,

you will receive a group insurance certificate containing a detailed description of the insurance coverage, including the definitions, exclusions, limitations, reductions and terminating events. The controlling provisions will be in the group policy. The information present in this summary does not modify the group policy, certificate or the insurance coverage in any way.

This is a limited benefit policy.

GP0614-ACC

SI 17615-D-CA-Zivin Services3 (1/19)

0-50081

IMPORTANT NOTICE TO PERSONS ON MEDICARE: THIS IS NOT MEDICARE SUPPLEMENT INSURANCE

Some healthcare services paid for by Medicare may also trigger the payment of benefits from this policy.

This insurance pays a fixed dollar amount, regardless of your expenses, for each day you meet the policy conditions. It does not pay your Medicare deductibles or coinsurance and is not a substitute for Medicare Supplement insurance.

Medicare generally pays for most or all of these expenses.

Medicare pays extensive benefits for medically necessary services regardless of the reason you need them. These include:

- Hospitalization
- Physician services
- Hospice
- Outpatient prescription drugs if you are enrolled in Medicare Part D
- Other approved items and services

This policy must pay benefits without regard to other health benefit coverage to which you may be entitled under Medicare or other insurance.

Before you buy this insurance:

- Check the coverage in all health insurance policies you already have.
- For more information about Medicare and Medicare Supplement insurance, review the Guide to Health Insurance for People with Medicare, available from The Standard Life Insurance Company of New York.
- For help in understanding your health insurance, contact your state insurance department or state health insurance assistance program (SHIP).

Max BuilderSM

Make Your Dental Benefits Work Harder



Seeing the dentist at least once a year is a great health habit. Your dental plan from The Standard[‡] includes Max Builder, a feature that can reward you for regular visits. Use it to build up extra annual benefits to pay for more costly future dental work.

5 Guidelines for Building Dental Benefits



1. **Visit the dentist yearly:** File at least one claim a year.



2. **Stay below the annual threshold:** During some years, you may need only basic preventive care, which makes it easy to stay below your plan's annual Max Builder threshold, typically half or less of your annual maximum benefit.



3. **Build annual maximums:** If you qualify (see 1 & 2), you can carry over a specified amount and build your maximum benefits for the following year, subject to plan limits.



4. **Stretch benefit dollars:** Use carried-over benefits to help reduce your out-of-pocket costs for covered dental services, subject to applicable deductible, coinsurance and plan provisions.



5. **Start over:** If you don't submit a dental claim during a benefit year, all carried-over benefits are lost. You can start building your maximum again the next year.

Check out the examples on the back to see how Max Builder can work for individuals and families.

continued on back



Take advantage of Max Builder to help reduce your out-of-pocket costs. If you have questions, call Group Dental Services at 800.547.9515. In New York, call 888.396.8641.

This policy has exclusions, limitations, reduction of benefits, and terms under which the policy may be continued in force or terminated. Please contact The Standard for additional information, including costs and complete details of coverage.

‡ The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of 1100 SW Sixth Avenue, Portland, Oregon, in all states except New York, where insurance products are offered by The Standard Life Insurance Company of New York of 360 Hamilton Avenue, Suite 210, White Plains, New York.

Standard Insurance Company

The Standard Life Insurance Company of New York

www.standard.com

9000 Rev 04-13; dates may vary by state.

This policy provides DENTAL insurance only.

Max Builder
17372-D (7/17) SI/SNY EE



Amy's Dental Plan

| | |
|-----------------|---------|
| Annual Maximum: | \$1,500 |
| Threshold: | \$750 |
| Carry-over: | \$250 |

Scenario 1: Amy Covers a Crown

| | |
|------------------|---|
| Years 1–2 | Amy visits her dentist, stays below the threshold and earns a \$250 carry-over award two years in a row, totaling \$500. |
| Year 3 | Amy uses her combined benefit of \$2,000 to help cover the cost of a new crown and related dental work. She exceeds her \$750 threshold and does not receive carry-over benefits. |
| Year 4 | Amy visits her dentist, stays below the threshold and earns a new \$250 award, which will increase her Year 5 annual maximum to \$1,750. |



The Johnson's Dental Plan

| | |
|-----------------|---------|
| Annual Maximum: | \$1,000 |
| (per member) | |
| Threshold: | \$500 |
| Carry-over: | \$250 |

Scenario 2: The Johnsons Find More Reasons to Smile

| | |
|------------------|--|
| Years 1–2 | Jeff, his wife, Janet, and their three kids see their dentist for preventive care and each earn a \$250 carry-over benefit two years in a row, totaling \$500 apiece. |
| Year 3 | Each family member starts out with a \$1,500 combined benefit. Janet and two of the kids visit the dentist and stay below the threshold. Jeff gets a root canal and uses all of his available benefits, exceeding the annual \$500 threshold. Their oldest daughter needs fillings and has a chipped tooth repaired, using \$1,000 of her available maximum, which also exceeds the threshold. |
| Year 4 | Janet and two children start out with a \$1,000 annual maximum and \$750 in carry-over benefits. Jeff starts with a \$1,000 annual maximum and \$0 in carry-over benefits. The daughter who exceeded the threshold last year starts with a \$1,000 annual maximum and a \$500 carry-over from years 1–2. |

‡ The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of 1100 SW Sixth Avenue, Portland, Oregon, in all states except New York, where insurance products are offered by The Standard Life Insurance Company of New York of 360 Hamilton Avenue, Suite 210, White Plains, New York. Product features and availability vary by state and company, and are solely the responsibility of each subsidiary. Each company is solely responsible for its own financial condition. Standard Insurance Company is licensed to solicit insurance business in all states except New York. The Standard Life Insurance Company of New York is licensed to solicit insurance business in only the state of New York.



Group Additional Life and AD&D Insurance

Help protect your loved ones from financial hardship.

Life insurance coverage is designed to help provide financial support and stability to your family should you pass away. Accidental Death & Dismemberment (AD&D) insurance provides an extra layer of protection if you die or become dismembered in an accident.



This plan offers:

- Competitive group rates
- The convenience of payroll deduction
- Benefits if you are dismembered, become terminally ill or die

② About This Coverage

If you take no action you'll be covered under Basic Life insurance provided you meet the eligibility requirements. Consider whether that would be enough to help your family meet daily expenses, maintain their standard of living, pay off debt and fund your children's education. If not, you may want to apply for additional coverage now.

Life Insurance

How Much Can I Apply For?

For You:

times your annual earnings up to \$

AD&D Insurance

The benefit is paid if you or your dependents are seriously injured or pass away as a result of a covered accident.

What Does My AD&D Benefit Provide?

Note: You cannot buy more coverage for your spouse or child(ren) than you buy for yourself.

For You:

The AD&D insurance coverage amount matches what you elect for Additional Life insurance.

For Your Spouse:

If you elect Dependents Life insurance, you must elect AD&D insurance. AD&D can be purchased in \$ increments from \$ to \$. Your elected AD&D amount cannot exceed your Dependents Life amount.

Keep in mind that the amount payable for certain losses is less than 100 percent of the AD&D insurance benefit.

See the Important Details section for more information, including requirements, exclusions, age reductions and definitions.

≡ Additional Feature

| Life Insurance | |
|---------------------|---|
| Accelerated Benefit | If you become terminally ill, you may be eligible to receive up to percent of your combined Basic and Additional Life benefit to a maximum of \$. |

How Much Life Insurance Do You Need?

After a serious accident or death in the family, there are many unexpected expenses. Your benefits could help your family pay for:

- Outstanding debt
- Burial expenses
- Medical bills
- Your children’s education
- Daily expenses

To estimate your insurance needs, you’ll need to consider your unique circumstances. Use our online calculator at www.standard.com/life/needs.

How Much Your Coverage Costs

Your Basic Life insurance is paid for by Zivin Services³. If you choose to purchase Additional Life coverage, you'll have access to competitive group rates, which may be more affordable than those available through individual insurance. You'll also have the convenience of having your premium deducted directly from your paycheck. How much your premium costs depends on a number of factors, such as your age and the benefit amount.

Use this formula to calculate your premium payment:

$$\text{Enter the amount of coverage you are requesting (see benefit amounts in the About This Coverage section).} \div 1000 = \text{Enter your rate from the rate table.} \times = \text{This amount is an estimate of how much you would pay each month.} \rightarrow \text{To get a sense of your semimonthly premium, divide your monthly premium amount by 2.}$$

| Age (as of Jan 1) | Your Rate* (Per \$1,000 of Total Coverage) | | Your Spouse's Rate** (Per \$1,000 of Total Coverage) |
|----------------------|--|-------------|---|
| | Tobacco | Non-Tobacco | |
| <30 | \$0.00 | \$0.00 | \$0.00 |
| 30–34 | \$0.00 | \$0.00 | \$0.00 |
| 35–39 | \$0.00 | \$0.00 | \$0.00 |
| 40–44 | \$0.00 | \$0.00 | \$0.00 |
| 45–49 | \$0.00 | \$0.00 | \$0.00 |
| 50–54 | \$0.00 | \$0.00 | \$0.00 |
| 55–59 | \$0.00 | \$0.00 | \$0.00 |
| 60–64 | \$0.00 | \$0.00 | \$0.00 |
| 65–69 | \$0.00 | \$0.00 | \$0.00 |
| 70–74 | \$0.00 | \$0.00 | \$0.00 |
| 75+ | \$0.00 | \$0.00 | \$0.00 |

*Includes a monthly AD&D rate of \$ per \$1,000 of AD&D benefit.

**Includes a monthly AD&D rate of \$ per \$1,000 of AD&D benefit for your spouse. The amount of AD&D you elect for your spouse may differ from the amount of Dependents Life insurance you elect for your spouse.

Important Details

Here's where you'll find the nitty-gritty details about the plan.

Life and AD&D Insurance Eligibility Requirements

A minimum number of eligible employees must apply and qualify for the proposed plan before coverage can become effective. If this requirement is not met, this plan will not become effective. To be eligible for coverage, you must be:

- An active L.L.C. Owner-employee or employee of Zivin Services³
- Regularly working at least 7 hours per week
- Insured for Basic Life insurance through The Standard

Temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible.

Medical Underwriting Approval for Life Coverage

Coverage Effective Date for Life Coverage

To become insured, you must:

- Meet the eligibility requirements listed in the previous sections
- [PLEASE ANSWER/CHOOSE EWP]
- Receive medical underwriting approval (if applicable)
- Apply for coverage and agree to pay premium and
- Be actively at work (able to perform all normal duties of your job) on the day before the insurance is scheduled to be effective

If you are not actively at work on the day before the scheduled effective date of your insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

Contact your human resources representative or plan administrator for further information about the applicable coverage effective date for your coverage.

Life and AD&D Age Reductions

Under this plan, your coverage amount reduces to [XX] percent at age [XX], to [XX] percent at age [XX] and to [XX] percent at age [XX].] [Your spouse's coverage amount reduces by your [spouse's] age as follows: to [XX] percent at age [XX], to [XX] percent at age [XX] and to [XX] percent at age [XX].] If you [or your spouse] are age [XX] or over, ask your human resources representative or plan administrator for the amount of coverage available.

Life Insurance Waiver of Premium

Your Life premiums may be waived if you:

- Become totally disabled while insured under this plan,
- Are under age , and
- Complete a waiting period of 180 days.

If these conditions are met, your Life insurance coverage may continue without cost until age , provided you give us satisfactory proof that you remain totally disabled.

Life and AD&D Insurance Portability

If your insurance ends because your employment terminates, you may be eligible to buy portable group insurance coverage from The Standard.

Life Insurance Conversion

If your insurance reduces or ends, you may be eligible to convert your existing Life insurance to an individual life insurance policy without submitting proof of good health.

Life Insurance Exclusions

Subject to state variations, you are not covered for death resulting from suicide or other intentionally self-inflicted injury, while sane or insane. The amount payable will exclude amounts that have not been continuously in effect for at least two years on the date of death.

AD&D Benefits

The amount of the AD&D benefit is equal to the amount payable for your or your spouse's or child(ren)'s Life benefit on the date of the accident. For all other covered losses, the amount is shown as a percentage of the amount payable for the benefit on the date of the accident. No more than 100 percent of the AD&D benefit will be paid for all losses resulting from one accident.

Any loss must be caused solely and directly by an accident within 365 days of the accident. A certified copy of the death certificate is needed to prove loss of life.

All other losses must be certified by a physician in the appropriate specialty determined by The Standard.

| Covered loss: | Percentage of AD&D benefit payable: |
|--|-------------------------------------|
| Life | 100% |
| One hand or one foot | 50% |
| Sight in one eye | 50% |
| Two or more of the losses listed above | 100% |
| Thumb and index finger of the same hand ³ | 25% |
| Quadriplegia | 100% |

| | |
|------------|-----|
| Triplegia | 75% |
| Hemiplegia | 50% |
| Paraplegia | 50% |

³ This benefit is not payable if an AD&D benefit is payable for the loss of the entire hand.

AD&D Insurance Exclusions

You are not covered for death or dismemberment caused or contributed to by any of the following:

- Committing or attempting to commit an assault or felony, or actively participating in a violent disorder or riot
- Suicide or other intentionally self-inflicted injury, while sane or insane
- War or any act of war (declared or undeclared), and any substantial armed conflict between organized forces of a military nature
- Voluntary consumption of any poison, chemical compound, alcohol or drug, unless used or consumed according to the directions of a physician
- Sickness or pregnancy existing at the time of the accident
- Heart attack or stroke
- Medical or surgical treatment for any of the above

When Your Insurance Ends

Your insurance ends automatically when any of the following occur:

- The date the last period ends for which a premium was paid
- The date your employment terminates
- The date you cease to meet the eligibility requirements (insurance may continue for limited periods under certain circumstances)
- The date the group policy, or your employer's coverage under the group policy, terminates
- For each elective insurance coverage, the date that coverage terminates under the group policy
- The date your Life coverage ends, your AD&D coverage will end as well

For more details on when your insurance ends, contact your human resources representative or plan administrator.

Group Insurance Certificate

If coverage becomes effective and you become insured, you will receive a group insurance certificate containing a detailed description of the insurance coverage, including the definitions, exclusions, limitations, reductions and

terminating events. The controlling provisions will be in the group policy. The information present in this summary does not modify the group policy, certificate or the insurance coverage in any way.

GPNYLI-809, et al., GPNYLI-809-ADD, GPNY0500-LIFE

-CA-Zivin Services3 (1/19)

0-50096

To Be Completed By Human Resources

| | | | |
|--------------|----------|------------------|--------------------|
| Group Number | Division | Billing Category | Date of Employment |
|--------------|----------|------------------|--------------------|

To Be Completed By Applicant

- ☐ Apply for Coverage ☐ Name Change Former Name _____
- ☐ Beneficiary Change **Complete Beneficiary Section**

| | | | |
|---|-------------------------|---|-----|
| Your Full Name | Employee Identification | Birth Date | |
| Address | City | State | ZIP |
| Phone Number | Job Title/Occupation | <input type="checkbox"/> Male <input type="checkbox"/> Female | |
| Employer Name Zivin Services3 | Hours Worked Per Week | | |
| Earnings \$ _____ Per: <input type="checkbox"/> Hour <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year | | | |

Coverage

Check with your Human Resources Department about coverage options, minimum and maximums available to you and, if applicable, Evidence Of Insurability requirements.

Life Insurance

- ☒ Basic Life (Employer Paid)

Your Full Name

Critical Illness Insurance

A. Do you have major medical or other minimum essential insurance that provides medical, hospital, and surgical coverage? (If the answer is "No", you are not eligible for Critical Illness.) ☐ Yes ☐ No

B. Are you age 65 or older? (If you answer "Yes", you are not eligible for Critical Illness.) ☐ Yes ☐ No

☒ Critical Illness Insurance (Employer Paid)*

Dependents Critical Illness Insurance (Employer Paid)

☐ Spouse

**Eligible child(ren) are automatically covered at 25% of your Coverage Amount.*

For Employer Paid coverage, do not complete the questions in this section.

1. Has a medical professional ever diagnosed you or your Spouse as having or prescribed medication for Acquired Immune Deficiency Syndrome (AIDS) or AIDS Related Complex (ARC)? **California law prohibits an HIV test from being required or used by health insurance companies as a condition of obtaining health insurance coverage.**
2. In the past 10 years, have you or your Spouse been treated for or been diagnosed by a medical professional as having:
 - diabetes (other than during pregnancy); heart disorder; angina; arterial disease; heart attack; angioplasty; coronary artery bypass; high blood pressure (hypertension) treated with three (3) or more medications; rheumatic fever; stroke; transient ischemic attack;
 - renal disease (excluding kidney stone or urinary tract infection); pancreas disorder; liver cirrhosis; hepatitis (excluding hepatitis A);
 - benign brain tumor; systemic lupus; muscular dystrophy; poliomyelitis; osteomyelitis or neurological disorder;
 - Addison's disease; sickle cell anemia; hemophilia; paralysis; organ transplant; tuberculosis; or lung disease (excluding asthma or acute pneumonia);
3. In the past 10 years, have you or your Spouse been treated for or been diagnosed by a medical professional as having cancer or malignancy (excluding non-melanoma skin cancer); bone marrow disorder, ulcerative colitis or Crohn's disease?
4. In the past 10 years, have you or your Spouse been treated for or been diagnosed by a medical professional as having: glaucoma; retinitis pigmentosa or macular degeneration?
5. In the past 10 years, have you or your Spouse been treated for or been diagnosed by a medical professional as having: Alzheimer's disease; dementia; multiple sclerosis; Amyotrophic Lateral Sclerosis (ALS) or Parkinson's disease?

Your Full Name

Beneficiary

This designation applies to your Life and Accidental Death and Dismemberment Insurance and Voluntary Accidental Death and Dismemberment Insurance, if any, available through your Employer. This designation also will apply to your Supplemental Life and Accident Insurance, if any, available through your Employer, unless replaced by a separate and later designation. Designations are not valid unless signed, dated, and delivered in accordance with the terms of the Group Policy during your lifetime.

| Primary — Full Name | Address | DOB | Phone No. | SSN if known | Relationship | % of Benefit* |
|------------------------|---------|-----|-----------|--------------|--------------|---------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Contingent — Full Name | Address | DOB | Phone No. | SSN if known | Relationship | % of Benefit* |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

*Total must equal 100%

For Critical Illness Insurance:

This benefit is under a limited benefit insurance policy. This policy is supplemental to health insurance and is not a substitute for major medical coverage. It is not intended to satisfy the individual mandate of the Affordable Care Act (ACA) or provide the minimum essential coverage required by the ACA. Lack of major medical coverage (or other minimum essential coverage) may result in an additional payment with your taxes.

Signature

I wish to make the choices indicated on this form. If electing coverage, I authorize deductions from my wages to cover my contribution, if required, toward the cost of insurance. I understand that my deduction amount will change if my coverage or costs change. I represent that the statements contained herein, including, if applicable, those made in response to the Evidence Of Insurability questions, are true and complete to the best of my knowledge and belief, and I understand that they form the basis of any coverage under the Group Policy(ies). I understand that any misstatements or failure to report information which is material to the issuance of coverage may be used as a basis for rescission of my insurance and/or denial of payment of a claim. I agree to notify Standard Insurance Company (The Standard) of any change in my medical condition while my enrollment application is pending. I agree that if my application is approved by The Standard, the effective date of any coverage will be determined in accordance with the terms of the Group Policy(ies), including any applicable Active Work requirement and my coverage will be subject to all terms and conditions of the Group Policy(ies).

Signature of Applicant (Member/Employee)

Date

Your Full Name

Beneficiary Information

- Your designation revokes all prior designations.
- Benefits are only payable to a contingent Beneficiary if you are not survived by one or more primary Beneficiary(ies).
- If you name two or more Beneficiaries in a class:
 1. Two or more surviving Beneficiaries will share equally, unless you provide for unequal shares.
 2. If you provide for unequal shares in a class, and two or more Beneficiaries in that class survive, we will pay each surviving Beneficiary his or her designated share. Unless you provide otherwise, we will then pay the share(s) otherwise due to any deceased Beneficiary(ies) to the surviving Beneficiaries pro rata based on the relationship that the designated percentage or fractional share of each surviving Beneficiary bears to the total shares of all surviving Beneficiaries.
 3. If only one Beneficiary in a class survives, we will pay the total death benefits to that Beneficiary.
- If a minor (a person not of legal age), or your estate, is the Beneficiary, it may be necessary to have a guardian or a legal representative appointed by the court before any death benefit can be paid. If the Beneficiary is a trust or trustee, the written trust must be identified in the Beneficiary designation. For example, "Dorothy Q. Smith, Trustee under the trust agreement dated _____."
- A power of attorney must grant specific authority, by the terms of the document or applicable law, to make or change a Beneficiary designation. If you have questions, consult your legal advisor.
- Dependents Insurance, if any, is payable to you, if living, or as provided under your Employer's coverage under the Group Policy.

The Standard Life Insurance Company of New York
360 Hamilton Avenue, Suite 210
White Plains NY 10601-1871
www.standard.com

Enrollment Booklet
-CA-Zivin Services3 (2/19)
0-50078