



# Making care and benefits easier

Proposal for: RevHealth LLC

# Introduction

Thank you for the opportunity to offer this proposal to you.

## Proposal Presented to

RevHealth LLC  
55 Bank Street  
Morristown, NJ 07960

SIC Code: 7311

## Proposal Presented by

Sun Life

## Benefits Quoted

Employee Basic Life; Employee Basic AD&D; Employee Voluntary Life; Spouse Voluntary Life; Child Voluntary Life; Long-Term Disability; Employee Assistance Program Essential; Dental Administrative Services Only; Vision; Accident insurance and Critical Illness

## Proposed Effective Date

January 1, 2024

## Things to Know

- This proposal shows a summary of proposed product(s), rates, and underlying assumptions. It is not part of the group policy or an administrative services agreement with Sun Life or its affiliated companies.
- This proposal is valid for 60 days, starting from May 26, 2023, and only for the proposed Effective Date.
- This proposal may include fully insured, nonparticipating coverage that terminates at retirement, unless otherwise noted.
- For fully insured coverages, we require that you provide a copy of the current carrier's policy or certificate, and for self-funded plans we require your Plan Document at time of sale.

## **The following notices apply to quotes for fully insured coverage:**

### **Producer Licensing**

All Sun Life companies require producers who use insurance quotes for the purpose of soliciting, selling, or negotiating insurance to be licensed both by the state where the prospective client is located and by any state where the solicitation, sale, or negotiation of insurance occurs, if different. This requirement pertains to all forms of solicitation, sale, or negotiation of insurance, including but not limited to solicitation, sale, or negotiation conducted in person or by telephone, by e-mail, by fax, or otherwise.

### **Producer Compensation**

We encourage brokers and their clients to discuss what commission or other compensation may be paid in connection with the purchase of products and services from Sun Life companies. All Sun Life companies may pay the selling broker, agency, or third party administrator for the promotion, sale, and renewal of the products and services offered in this proposal. In addition to our standard compensation arrangements, we may make additional cash payments or reimbursements to selling brokers in recognition of their marketing and distribution activities, persistency levels, and volume of business. For New York-issued cases, producers must comply with the specific compensation disclosure requirements of New York Regulation 194.

### **Plan and Rates**

Acceptance of the group and final rates will be determined by Sun Life and may be based on actual enrollment and case experience, if required. Terms and conditions of any coverage under the policy may be determined by all required final data and by underwriting rules, minimum participation requirements, and policy provisions in effect on the date coverage begins.

### **Underwriting Companies**

The Sun Life group of companies operates under the "Sun Life" name strictly as a marketing name, and no legal significance is expressed or implied. In the United States and elsewhere, insurance products are offered by members of the Sun Life group that are insurance companies. Sun Life Financial Inc., the publicly traded holding company for the Sun Life group of companies, is not an insurance company and does not guarantee the obligations of these insurance companies. Each insurance company relies on its own financial strength and claims-paying ability.

# Life and AD&D

We are pleased to offer Life and AD&D insurance to employers, with the benefits employees want. Here are some highlights:

- **Value-Added Services:** Employers can choose one of the Value-Added Services packages that best fits the needs of their employees. These noninsurance services are included in the price of the Life coverage.
  - **Self Care+:** Offers employees and their families (age 13+) 24/7 access to digital tools such as mindfulness activities, guided journals, blogs, and meditations to help them build resilience and improve their mental health. Service provided by AbleTo and is not insurance.<sup>2</sup>
  - **Emergency Travel Assistance & ID Theft:** Emergency Travel Assistance provides medical, dental and personal emergency assistance for employees and dependents traveling 100+ miles from home. Identity Theft Protection offers prevention and resolution tools to safeguard data and restore its integrity if it is used fraudulently. These services are provided by Assist America and are not insurance.<sup>2</sup>
  - **Online Will Preparation & Claimant Support Services:** Online Will Preparation provides step-by-step guidance online to create a legally binding will. Claimant Support Services connect claimants and beneficiaries to professional grief, financial and legal counseling. These services are provided by ComPsych and are not insurance.<sup>2</sup>
- **Accelerated Benefits:** Terminally ill employees may access a portion of their death benefit while they are alive.
- **Waiver of Premium:** This benefit helps employees maintain important Life coverage when they become Totally Disabled, as defined by the policy, and meet age requirements. Employers can customize the Elimination Period or choose no Elimination Period—a popular choice because it means easy tracking and immediate benefits for eligible employees.
- **Claims Settlement:** Beneficiaries may elect to receive either a complimentary interest-bearing account or a lump-sum payment. Availability may vary by state.
- **Accidental Death & Dismemberment (AD&D):** Protection for covered Accidental Death and covered injuries resulting in Speech/Hearing Loss, Loss of Limb, Loss of Thumb and Index Finger, and Loss of Use of a Limb Due to Quadriplegia, Paraplegia, or Hemiplegia—all with a standard 365-day loss period. Many optional riders can be added, including Seat Belt, Air Bag, Helmet, Business Travel, Bereavement Counseling, and Child and/or Spouse Education. Availability may vary by state.
- **Enrollment Campaigns and Support:** We work with benefits managers to ensure easy enrollment and provide a wide range of tools to help ensure maximum participation at no additional cost.
- **Portability/Continuation:** Allows employees to take their group Life insurance with them (Portability) or continue their Life insurance (Continuation) under the group policy when coverage ends for reasons other than sickness, injury, retirement, or termination of the employer's plan. Employees can apply for portable or continued Term Life coverage without satisfying Evidence of Insurability. Continuation is available in lieu of Portability in states where Portability is not available.
- **Service Guarantees:** We are pleased to offer a Life Service Guarantee, which covers the speed and accuracy of our claims processing as well as how quickly we respond to our customers' phone calls. In addition, we include an overall satisfaction guarantee to ensure that our customers are 100% satisfied with our service. If we do not meet our service standards, the employer will receive a refund via check. Sun Life's maximum liability under this guarantee for any policy year is limited to

Group Life and AD&D coverage is underwritten by Sun Life Assurance Company of Canada  
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

the lesser of 3% of the policyholder's annual Life premium or \$5,000. The maximum payment for a breach of any one component is one-third of the maximum liability (lesser of 1% or \$1,667). If a policyholder has more than one line of insurance coverage, the Overall Satisfaction component will be paid only if the service issue arises under this guarantee. Certain limitations apply.

Footnote information is located in the General Disclosures section on the last page of this proposal.

Group Life and AD&D coverage is underwritten by Sun Life Assurance Company of Canada  
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

# Basic Life

## Plan design and rates

### Employee Basic Life and AD&D plan design

<b>Employee Basic Life</b>	
Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
Effective Date	January 1, 2024
	<b>Class 1</b>
Class description	All Eligible Employees
Waiting Period	30 days of employment
Benefit amount	Flat \$100,000
Maximum benefit	\$100,000
Guaranteed Issue amount	\$100,000
Contributions	Noncontributory
Participation requirement	100%

<b>Employee Basic AD&amp;D</b>	
Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
Effective Date	January 1, 2024
	<b>Class 1</b>
Class description	All Eligible Employees
Benefit amount	Flat \$100,000
Maximum benefit	\$100,000
Compulsory coverage	Yes
Contributions	Noncontributory
Participation requirement	100%

### Basic Life rates

Coverage	Total employees	Monthly rate	Total estimated monthly volume	Total estimated monthly premium	Total estimated annual premium
Employee Basic Life	243	\$0.070	\$24,040,000	\$1,683	\$20,194
Employee Basic AD&D	243	\$0.020	\$24,040,000	\$481	\$5,770
<b>Total estimated premium</b>				<b>\$2,164</b>	<b>\$25,964</b>
Rate basis: Per \$1,000 of volume					
There could be income tax and ERISA implications if the employer-funded Basic Life rates shown above have been reduced in cost (subsidized) by employee-funded Voluntary Life rates that may also be in this proposal. Subsidized rates can potentially create additional imputed income for some employees (under IRC Section 79) and potentially violate ERISA's fiduciary rules. As a group insurance carrier, Sun Life cannot make this determination for you. We recommend that you consult with your tax consultant and attorney before implementing the Basic and Voluntary Life rates in this proposal.					

Sequence Number: 21

Group Basic Life and AD&D coverage is underwritten by Sun Life Assurance Company of Canada  
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.



## Included in this plan:

- Sun Life's Life Standard Graded Scale broker commission
- 36-month rate guarantee from the Effective Date
- Employee age reductions: All coverage amounts reduce to 65% at age 65, 50% at age 70.
- Waiver of Premium: For employees with an approved disability prior to age 65, premium is waived until age 65 or for 12 months (whichever is later). For employees disabled on or after age 65 but prior to age 70, premium is waived for 12 months. There is an Elimination Period of 9 months which must be satisfied before the waiver of premium begins. The definition of Total Disability is disabled from any occupation.

Waiver of premium is provided on the following benefits: Employee Basic Life.

- Portability: Coverage may be ported upon termination of active employment.
- Conversion Privilege
- A choice of one Value-Added Service: Self Care+, Emergency Travel Assistance & ID Theft, or Online Will Preparation & Claimant Support Services.<sup>2</sup>
- Coverage will be continued on a premium-paying basis for a period of 1 month during a layoff.
- Coverage will be continued on a premium-paying basis for a period of 1 month during a leave of absence approved by the policyholder.
- Coverage will be continued on a premium-paying basis for a period of 12 months during a period of injury or sickness.
- Earnings definition: Earnings are defined as the current earnings reported by the employer. Earnings include deductions made for pre-tax contributions to a qualified deferred compensation plan, Section 125 plan, or flexible spending account. Earnings do not include commissions, bonuses, overtime, or any other compensation.
- 24-hour AD&D coverage
- Special AD&D benefits:
  - Air Bag
  - Bereavement Counselling
  - Child Care
  - Coma
  - Common Carrier
  - Dependent Education-Child
  - Dependent Education-Spouse
  - Repatriation
  - Seat Belt

Footnote information is located in the General Disclosures section on the last page of this proposal.

Group Basic Life and AD&D coverage is underwritten by Sun Life Assurance Company of Canada  
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

# Voluntary Life

## Plan design and rates

### Employee Voluntary Life and Dependent Voluntary Life plan design

Employee Voluntary Life		
Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week	
Effective Date	January 1, 2024	
	<b>Class 1</b>	
Class description	All Eligible Employees	
Waiting Period	30 days of employment	
Benefit amount	Increments of \$10,000	
Maximum benefit	\$500,000 or 5 times annual earnings, whichever is less	
Minimum benefit	\$10,000	
Guaranteed Issue amount		
	Age band	Amount
	Under Age 65	\$150,000
	65 - 69	\$50,000
	70+	\$10,000
Participation requirement	20%	

Spouse Voluntary Life		
Eligible employees	All Full-Time United States Employees working in the United States enrolled in Employee Voluntary Life Insurance who are scheduled to work a minimum of 30 hours per week	
Effective Date	January 1, 2024	
	<b>Class 1</b>	
Class description	All Eligible Employees	
Spouse benefit amount	Increments of \$10,000	
Spouse maximum benefit	\$250,000	
Minimum benefit	\$10,000	
Spouse Guaranteed Issue amount	\$10,000	
Maximum % of employee coverage	50%	
Spouse termination age	70	

Employee must elect Voluntary Life to elect Spouse Voluntary Life / AD&D

Child Voluntary Life		
Eligible employees	All Full-Time United States Employees working in the United States enrolled in Employee Voluntary Life Insurance who are scheduled to work a minimum of 30 hours per week	
Effective Date	January 1, 2024	
	<b>Class 1</b>	
Class description	All Eligible Employees	
Child benefit amount	Increments of \$1,000	
Child maximum benefit	\$10,000	
Minimum benefit	\$1,000	
Child Guaranteed Issue amount	\$10,000	
Full child benefit begins	14 days	
Child benefit by age	birth to 14 days	\$0

Group Voluntary Life coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.



Child eligibility	Unmarried dependent children from 14 days to age 23 or to age 25 if full-time student
Maximum % of employee coverage	10%

Employee must elect Voluntary Life to elect Child Voluntary Life / AD&D

## Voluntary Life rates

Employee Voluntary Life				
Age band	Participating employees	Monthly rate	Estimated monthly volume	Estimated monthly premium
Under age 20	0	\$0.060	\$0	\$0
20-24	1	\$0.060	\$150,000	\$9
25-29	6	\$0.060	\$510,000	\$31
30-34	1	\$0.080	\$150,000	\$12
35-39	9	\$0.090	\$1,650,000	\$149
40-44	9	\$0.113	\$1,570,000	\$177
45-49	10	\$0.177	\$2,350,000	\$416
50-54	13	\$0.310	\$2,350,000	\$729
55-59	8	\$0.479	\$980,000	\$469
60-64	5	\$0.735	\$1,110,000	\$816
65-69	2	\$1.823	\$63,375	\$116
70-74	1	\$3.242	\$2,600	\$8
75-79	0	\$3.242	\$0	\$0
80-84	0	\$3.242	\$0	\$0
85 and over	0	\$3.242	\$0	\$0

Rate basis: Per \$1,000 of volume

Spouse Voluntary Life				
Age band	Participating employees	Monthly rate	Estimated monthly volume	Estimated monthly premium
Under age 20	0	\$0.060	\$0	\$0
20-24	1	\$0.060	\$10,000	\$1
25-29	6	\$0.060	\$60,000	\$4
30-34	1	\$0.080	\$10,000	\$1
35-39	9	\$0.090	\$90,000	\$8
40-44	9	\$0.113	\$90,000	\$10
45-49	10	\$0.177	\$100,000	\$18
50-54	13	\$0.310	\$130,000	\$40
55-59	8	\$0.479	\$80,000	\$38
60-64	5	\$0.735	\$50,000	\$37
65-69	2	\$1.823	\$20,000	\$36

Rate basis: Per \$1,000 of volume

## Totals

Coverage	Total participating employees	Monthly rate	Total estimated monthly volume	Total estimated monthly premium	Total estimated annual premium
Employee Voluntary Life	65	N/A	\$10,885,975	\$2,928	\$35,140
Spouse Voluntary Life	64	N/A	\$640,000	\$193	\$2,314
Child Voluntary Life	65	\$0.167	\$22,750	\$4	\$46
<b>Total estimated premium</b>				<b>\$3,125</b>	<b>\$37,500</b>

Rate basis: Per \$1,000 of volume

Sequence Number: 22

Group Voluntary Life coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

### Included in this plan:

- A flat 13% broker commission
- 36-month rate guarantee from the Effective Date
- Employee age reductions: All coverage amounts reduce to 65% at age 65, 50% at age 70.
- Spouse age reductions: None
- Includes ability to increase benefit amount to the next increment annually without Evidence of Insurability.
- Waiver of Premium: For employees with an approved disability prior to age 65, premium is waived until age 65 or for 12 months (whichever is later). For employees disabled on or after age 65 but prior to age 70, premium is waived for 12 months. There is an Elimination Period of 9 months which must be satisfied before the waiver of premium begins. The definition of Total Disability is disabled from any occupation.

Waiver of Premium is provided on the following benefits: Employee Voluntary Life.

- Portability Coverage may be ported upon termination of active employment.
- Conversion Privilege
- Employee Accelerated Death Benefit of 75% to a maximum of \$500,000.
- Coverage will be continued on a premium-paying basis for a period of 1 month during a layoff.
- Coverage will be continued on a premium-paying basis for a period of 1 month during a leave of absence approved by the policyholder.
- Coverage will be continued on a premium-paying basis for a period of 12 months during a period of injury or sickness.
- Earnings definition: Earnings are defined as the current earnings reported by the employer. Earnings include deductions made for pre-tax contributions to a qualified deferred compensation plan, Section 125 plan, or flexible spending account. Earnings do not include commissions, bonuses, overtime, or any other compensation.

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Group Voluntary Life coverage is underwritten by Sun Life Assurance Company of Canada  
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

## Assumptions

- Standard Sun Life policy language, as filed in the policyholder's situs state, is offered. No special language or state filings are included unless approved in advance and policy provisions are subject to state requirements and availability.
- Completion and approval of the Group Life Insurance Transition Statement prior to the Effective Date. This statement addresses employees who are not Actively at Work.
- An employee must be Actively at Work on his/her Effective Date for coverage to become effective. If an employee is not Actively at Work on his or her Effective Date, coverage will not become effective until the employee is again Actively at Work. Continuity of coverage may apply for takeover plans.
- If the minimum participation requirement is not met for any contributory or employee paid coverage, the policy provisions, Guaranteed Issue amount, and rates are subject to change.
- Dependents are eligible for coverage only when the employee is insured. Dependent coverage amounts are subject to state requirements.
- Coverage for dependents who are hospital-confined due to illness or injury will be effective on the date they are no longer hospital-confined. Hospital-confined does not apply to a newborn child.
- If AD&D coverage is compulsory, employees who elect Life coverage automatically receive AD&D coverage equal to their Employee Life amount.
- Receipt of a copy of the prior carrier's policy or certificate at the point of sale.
- Sun Life requires a final census before the point of sale and reserves the right to re-rate the proposal upon verification of dates of birth, genders, salaries, and occupations.
- Common ownership of the business units.
- Notification of any employer-completed merger or acquisition.
- Evidence of Insurability is required for late entrants, coverage increases, and coverage in excess of the Guaranteed Issue amount.
- For Voluntary Life insurance late entrants may elect the initial increment amount without having to provide Evidence of Insurability (EOI). Existing members may increase coverage by one increment in any year without having to provide EOI, even if the increased coverage exceeds the Guaranteed Issue amount. Other scenarios require Evidence of Insurability to be met.

Group Life and AD&D coverage is underwritten by Sun Life Assurance Company of Canada  
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

# Long-Term Disability

We are pleased to offer income replacement benefits that take into consideration disability management through cost-containment and rehabilitation. Here are some highlights:

- **Retro Disability Benefits®:** In states that allow it, this innovative feature gives extra benefits to employees with serious LTD claims. It's designed to help employees who are continuously hospitalized for 14 days or more at the onset of Total Disability and who complete the Elimination Period. When we pay the first Total Disability benefit, we will retroactively pay that claimant his or her LTD benefits from the first day the claimant was deemed Totally Disabled. This benefit is paid in a lump-sum amount, and there are no offsets.
- **Innovative Return-to-Work Incentives:**
  - We offer Zero-Day Residual benefits with no requirement of Total Disability before benefits are payable. Our Return-to-Work incentive allows combined earnings of up to 100% during the Return-to-Work period.
  - For customers who choose our Rehabilitation option, claimants who participate in a rehabilitation program approved by Sun Life receive an additional 10% benefit.
- **Rehabilitation Services:** We provide comprehensive Rehabilitation Services through our on-staff specialists. We offer customized Return-to-Work plans; physical, recreational, and vocational therapy; job search assistance; and financial assistance for worksite accommodations and other expenses.
- **Service Guarantees:** We are pleased to offer an LTD Service Guarantee, which covers the speed and accuracy of our claims processing as well as how quickly we respond to our customers' phone calls. In addition, we include an overall satisfaction guarantee to ensure that our customers are 100% satisfied with our service. If we do not meet our service standards, the employer will receive a refund via check. Sun Life's maximum liability under this guarantee for any policy year is limited to the lesser of 3% of the policyholder's annual LTD premium or \$5,000. The maximum payment for a breach of any one component is one-third of the maximum liability (lesser of 1% or \$1,667). If a policyholder has more than one line of insurance coverage, the Overall Satisfaction component will be paid only if the service issue arises under this guarantee. Certain limitations apply.
- **An Effective Social Security Assistance Program:** We provide this service for all claimants.
- **Integrated Life Waiver of Premium Processing:** When the LTD plan is offered in combination with our Group Life coverage, we automatically start the Life waiver claim review process for claimants. This service helps make it easier for claimants to apply for Life Waiver of Premium benefits.
- **A Wide Range of Optional Features:** Valuable options include a COBRA Continuation Premium Reimbursement benefit, a Child Care Expense benefit, a Child Continuing Education Expense benefit, Cost of Living Adjustments, a Retirement Contribution benefit, an Assisted Living benefit, a Survivor Benefit, and alternate funding (for larger employers).

Group Long-Term Disability coverage is underwritten by Sun Life Assurance Company of Canada  
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

# Long-Term Disability

## Plan design and rates

### Long-Term Disability plan design

Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
Effective Date	January 1, 2024
	<b>Class 1</b>
Class description	All Eligible Employees
Waiting Period	30 days of employment
Maximum benefit %	60% of monthly earnings
Maximum monthly benefit	\$7,500
Guaranteed Issue amount	\$7,500
Elimination Period	90 days
Definition of Disability	24 months own occupation; loss of duties and loss of earnings required
Earnings Test	80% during the own occupation period and 80% during the any occupation period
Minimum benefit	\$100
Contributions	Noncontributory
Participation requirement	100%
Employer contribution %	100%

### Long-Term Disability and EAP Essential rates

Coverage	Total participating employees	Monthly rate	Total estimated volume	Total estimated monthly premium	Total estimated annual premium
LTD	243	\$0.155	\$2,268,583	\$3,516	\$42,196
EAP Essential	243	\$0.005	\$2,268,583	\$113	\$1,361
Combined LTD and EAP Essential rate		\$0.160		\$3,629	\$43,557

Rate basis: Per \$100 of monthly covered payroll

Sequence Number: 23

### Included in this plan:

- Sun Life's LTD Standard Graded Scale broker commission
- 36-month rate guarantee from the Effective Date
- Benefit duration of SSNRA
- Direct integration
- Family Social Security offset
- Partial Disability benefit
- 12-month Return-to-Work incentive
- Zero-Day Residual
- Recurrent Disability
- 3-month lump-sum gross Survivor Benefit
- 3/12 pre-existing condition exclusion
- 24-month mental/nervous limitation

Group Long-Term Disability coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

- 24-month drug/alcohol limitation
- Voluntary rehabilitation provision
- Rehabilitation program provides additional 10% benefit
- Child Care benefit
- Reasonable Accommodation benefit of up to \$5,000
- 15 trial work days during the Elimination Period
- Employer FICA administration for any taxable benefits
- Coverage will be continued on a premium-paying basis for a period of 1 month during a layoff.
- Coverage will be continued on a premium-paying basis for a period of 1 month during a leave of absence approved by the policyholder.
- Earnings definition: Earnings are defined as the earnings reported by the employer immediately prior to the first date of disability. Earnings include deductions made for pre-tax contributions to a qualified deferred compensation plan, Section 125 plan, or flexible spending account, commissions and bonuses. Earnings do not include overtime, or any other compensation.

Total earnings are averaged over 24 months.

Group Long-Term Disability coverage is underwritten by Sun Life Assurance Company of Canada  
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.



## Assumptions

- Standard Sun Life contractual language, as filed in the policyholder's situs state, is offered. No special language or state filings are included unless approved in advance. Policy provisions are subject to state requirements and availability.
- An employee must be Actively at Work on his/her Effective Date for coverage to become effective. If an employee is not Actively at Work on his or her Effective Date, coverage will not become effective until the employee is again Actively at Work. Continuity of coverage may apply for takeover plans.
- Employees in states with statutory STD plans are covered by those statutory plans, and any LTD benefit payable will be offset by those statutory benefits. We reserve the right to re-rate if this assumption proves incorrect.
- The employer has not opted out of Workers' Compensation coverage.
- Sun Life requires a final census, which includes participation information for contributory/voluntary benefits, before the point of sale and reserves the right to re-rate the proposal upon verification of dates of birth, genders, salaries, individual benefit elections, and occupations.
- Receipt of a copy of the prior carrier's policy or certificate at the point of sale.
- Common ownership of the business units.
- Notification of any employer-completed merger or acquisition.
- All noncontributory plan designs assume the employer pays the entire premium and that all benefits are fully taxable.

Group Long-Term Disability coverage is underwritten by Sun Life Assurance Company of Canada  
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

# EAP and Work/Life Services

Through our EAP By Design<sup>SM</sup> program, employers and employees have access to many helpful services that address personal life challenges and improve workplace productivity and performance. We are proud to offer our three-tiered Employee Assistance Program (EAP) in partnership with ComPsych<sup>®</sup> Corporation.<sup>2</sup> Here are some highlights:

## EAP Essential<sup>SM</sup>

This tier provides a wide range of services, including:

- **EAP:** Three confidential telephonic counseling sessions with experienced clinicians available 24x7.
- **Legal Resources:** One in-person consultation with a local attorney at no charge plus unlimited phone access to ComPsych<sup>®</sup> legal professionals and discounts on additional services.
- **Financial Resources:** Unlimited phone access to financial professionals for information regarding personal finance and related issues.
- **Work/Life Resources:** Information and referrals on child care, elder care, adoption, relocation, and other personal convenience matters.
- **HR Resources:** Phone access to HR professionals who consult on various workplace-related issues such as managing difficult employee situations.
- **GuidanceResources<sup>®</sup> Online:** Extensive content regarding personal or family concerns; helpful planning tools; discount programs; and more.
- **Health Risk Assessments:** Online access to a health risk assessment survey, plus a variety of health management tools and information.
- **Direct-to-Customer Reports:** Confidential utilization reports that help with trending, tracking, and identifying employee interest areas.
- **Employee Materials and Website:** Flyers, wallet cards, e-posters, and access to an award-winning website personalized with the customer's company name.

Footnote information is located in the General Disclosures section on the last page of this proposal.

EAP is a service provided by ComPsych<sup>®</sup> Corporation. It is not insurance.

## EAP Essential<sup>SM</sup> rates

Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
Benefit Effective Date	January 1, 2024
Number of eligible employees	243
Monthly rate	Blended with Long-Term Disability
Volume	
Rate basis	
Estimated monthly cost	
Estimated annual cost	

Sequence Number: 4

- The EAP cost will be combined with the Long-Term Disability cost for one billed rate.
- These services must be packaged with a Sun Life fully insured product or SunAdvisor® Advice to Pay services: Full-Service Advice to Pay or Advice Plus.

EAP is a service provided by ComPsych® Corporation. It is not insurance.

# Group Dental

We are pleased to offer comprehensive PPO plans and flexible features that can be easily paired to meet your group's dental needs. Here are the highlights:

- **Flexible Plan Designs:** Employers can customize our Passive PPO, Active PPO, and/or Maximum Allowable Charge (MAC) plans to meet their needs.\* Offer two plans for a Dual Choice benefit. Include optional features—like orthodontia coverage—for a more robust offering. Adjust benefit waiting periods, deductibles, and some procedure types to suit your employees and your bottom line.
- **Voluntary Dental:** Once a plan design is selected, employers can choose to offer the plan at 100% employee paid for a truly voluntary plan. All voluntary plans are equipped with a voluntary enrollment strategy to improve participation in the plan. Participation requirements apply.
- **Administrative Services Only (ASO) Dental:** An Administrative Services Only (ASO) plan offers the cost advantages of self-funding while providing the same claims processing, payment, reporting and other administrative services found in a fully insured plan. Dental ASO is an administrative service provided to employer sponsored, self-insured dental plans. It is not insurance.
- **Sun Life Dental Network®:** Our Dental plans offer one of the nation's largest PPO **networks**<sup>1</sup>. With strong provider penetration and quality assurance controls, it's easy for employees to receive quality dental care from a network dentist near home or work.
- **Lifetime of Smiles®:** We know oral health leads to overall health. That's why we built a program to encourage preventive care with optional benefits, such as:
  - Preventive Max Waiver® – routine dental care does not count towards the annual maximum
  - Preventive Rewards – members can get additional annual maximum dollars the next year based on their paid claims for preventive services
  - RollMax – unused annual maximum dollars can rollover to the next year
- **Robust Online Services:** Employers with Sun Life Dental have access to Sun Life Connect, our user-friendly portal for online plan administration. Your employees can create a Sun Life account to view Explanation of Benefits, find a dentist, learn about dental insurance, read about dental health, and more.
- **Great Service, Guaranteed:** We are dedicated to providing our customers with prompt, responsive customer service. To prove it, we offer a money-back service guarantee that covers the speed and accuracy of our claims processing as well as how quickly we respond to our customers' phone calls. In addition, we include an overall satisfaction guarantee to ensure that our customers are 100% satisfied with our service. If we do not meet our service standards, the employer will receive a refund via check. Sun Life's maximum liability under this guarantee for any policy year is limited to the lesser of 3% of the policyholder's annual Dental premium or \$5,000. The maximum payment for a breach of any one component is one-third of the maximum liability (lesser of 1% or \$1,667). If a policyholder has more than one line of insurance coverage, the Overall Satisfaction component will be paid only if the service issue arises under this guarantee. Certain limitations apply.

1. Zelis Network Analytics data as of January 2022 and based on unique dentist count. Sun Life's dental networks include its affiliate, Dental Health Alliance, L.L.C.® (DHA), and dentists under access arrangements with other dental networks. Nationwide counts are state level totals.

\*Product offerings may not be available in all states and may vary depending on state laws and regulations.

Dental ASO is an administrative service provided to employer sponsored, self-insured dental plans. It is not insurance.

# Dental Administrative Services Only (ASO)

## Class

All Eligible Employees

## Plan design and fees

### Plan design summary

Dental plan overview	
<b>Eligible Employees:</b>	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
<b>Effective Date:</b>	January 1, 2024
<b>Plan type</b>	PPO
<b>Dental PPO Network</b>	Sun Life Dental Network <sup>SM</sup>
<b>In-Network Reimbursement</b>	Sun Life Dental Network <sup>SM</sup>
<b>Out-of-Network Reimbursement</b>	90th Percentile of the Usual and Customary Charge
<b>Orthodontic coverage (Type IV)</b>	This plan includes Child Only Orthodontic coverage.  A person must be covered under a Dental Plan to be eligible for Orthodontic coverage
<b>Dependent Coverage Children</b>	Children to age 26
<b>Open enrollment at Issue and each Annual Enrollment</b>	Yes

The listed coinsurance percentages shown below represent the portion of Sun Life's allowable charge for which the plan will be responsible. Network providers agree to accept the network's allowable charge for covered services as payment in full. If covered employees or their eligible dependents receive services from a non-network provider, Sun Life will apply the coinsurance percentages shown below to 90th Percentile of the usual and customary charge for covered services and they will be responsible for the difference up to the provider's charge.

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## Calendar Year Deductible

Procedure Type	In-Network Deductible	Out-of-Network Deductible
Type I Preventive Services	Not applicable	
Type II Basic Services	\$0 individual / \$0 family	\$25 individual / \$75 family
Type III Major Services		
Type IV Ortho Services	Not applicable	

Deductible values are combined between In-Network and Out-of-Network.

## Coinsurance

	In-Network	Out-of-Network
Type I Preventive Services	100%	100%
Type II Basic Services	100%	80%
Type III Major Services	60%	50%
Type IV Ortho Services	50%	50%

## Benefit Waiting Periods

- A Late Entrant Benefit Waiting Period of 6 months for Type II Basic Restorations, 12 months for all other Type II Basic Services, and 24 months for Type III Major Services will apply to employees who enroll in this dental plan more than 31 days after becoming eligible.
- A Late Entrant Benefit Waiting Period of 24 months for Type IV Orthodontic Services will apply to employees who enroll in this dental plan more than 31 days after becoming eligible.

## Calendar Year Maximum Benefit

	In-Network	Out-of-Network
Types I, II and III (Preventive, Basic and Major) Services	\$2,000 per person	\$2,000 per person
Type IV Ortho Services	\$2,000 lifetime per child under age 26	\$2,000 lifetime per child under age 26

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## Covered expenses

Type I Preventive covered dental expenses	Coverage limitations
Oral Evaluations	2 in any calendar year
Dental Prophylaxis (Cleanings)	2 per calendar year - is limited to 2 of these services in any calendar year
Fluoride Treatments	Covered Persons under age 19 1 in any 6 consecutive months
Sealants	Covered Persons under age 16 Once per tooth per 36 consecutive months on permanent first and second molars
Full Mouth X-Rays	1 in 60 consecutive months
Bite-Wing X-Rays	1 in 12 consecutive months
Intraoral X-Rays	4 Films in any 12 month period
Palliative Treatment	Paid as a separate benefit only if no treatment, except x-rays, was rendered during the visit
Space Maintainers	Covered Persons under age 19 Once per tooth in any 3 year period
Type II Basic covered dental expenses	Coverage limitations
Simple Extractions	No Limitation
Periodontal Maintenance	Periodontal Maintenance following active Periodontal Therapy - 2 per calendar year.
Amalgam Restorations	Once per tooth surface in any 24 consecutive months
Composite and Silicate Restorations	Once per tooth surface in any 24 consecutive months and excluding posterior teeth
Periodontics (Non-Surgical): Scaling and Root Planing	Once per 24 consecutive months per area of the mouth
Surgical Periodontics	Once per 36 consecutive months per area of the mouth
Endodontics: Root Canal Therapy	Root Canal Therapy is limited to 1 time per tooth in any consecutive 24 months period
Oral Surgery: Surgical Extraction of Erupted and Impacted Teeth	Multiple surgical services on 1 area of the mouth will be based on the most inclusive procedure
General Anesthesia	Benefits payable as a separate expense only when required for the surgical extraction of an impacted tooth
Type III Major covered dental expenses	Coverage limitations
Inlays and Onlays	Covered if tooth cannot be restored by fillings Once per tooth in any 10 years period
Crowns	Covered if tooth cannot be restored by filling or other means Once per tooth in any 10 years period
Crown Buildup	Once per 10 years
Full or Partial Dentures	Once in any 10 years
Fixed Bridges	Once in any 10 years
Surgical Implants	Once per 10 years

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Type IV Orthodontic covered expenses	Coverage limitations
Orthodontic Treatment	Orthodontic treatment is limited to the Dependent Children or student age listed above

## Dental ASO Fee and projected claims

Fee Overview	
Number of employees:	188
Monthly Administration Fee* (Per employee per month)	\$7.95
Monthly Administration Cost	\$1,494.60
Annual Administration Cost	\$17,935.20
Projected Annual Incurred Claims	\$200,184.24
Total Projected Cost	\$218,119.44

\* Fees are quoted including broker compensation amount of \$5.5 Per Employee Per Month.

Sequence Number: 24

## Claims Funding Factor

Employee only	\$46.31
Employee + spouse	\$93.72
Employee + child(ren)	\$116.23
Employee + Family	\$170.64

The amounts above cover claim funding only. COBRA costs would equal the claim funding amount plus the ASO fee. COBRA regulations allow the employer to charge up to 102% of the per employee plan cost to employees or employees with dependents electing a COBRA continuance.

### Included in this plan:

- 36 month fee guarantee from the Effective Date
- Administration Fee and claims projections assume 243 eligible employees, with 188 participating or 77.4% participation
- Plan provisions are based on our standard plan unless there are specific variations listed under "Variations From Our Standard Contract"
- An employee enrollment form or census listing will be used
- Fees assume this is the only dental plan being offered to employees in this class
- We will provide claim adjudication services only. The employer is responsible for funding the dental plan

The terminology used in this proposal is not meant to imply that Sun Life will serve as the Plan Administrator (as this term is defined by ERISA), or that this is an insured product. The terms of the Administrative Services Agreement, signed by the employer and Sun Life will acknowledge the agreed upon terms for this product.

Dental ASO is an administrative service provided to employer sponsored, self-insured dental plans. It is not insurance.

## Claim Services

- **Run-Out Claims Administration**

Upon termination of the SunLife Administrative Services Agreement, we will process claims that were incurred prior to the termination date. We will not charge an additional administration fee for processing claims during the run-out period. These claims must be received by Sun Life within 90 days following the termination date of the plan. The claims funding process shall continue until the expiration of the 90-day run-out period.

- **Claims Processed Daily**

Claims are paid weekly as they are approved. No claims are held over for employer funding

- **Run-In Claims Administration**

This option is available for claims incurred within one year preceding the effective date and submitted within 90 days following the effective date of the Sun Life Administrative Services Agreement. This option helps the employer continue to fund claims on the employees' behalf without interruption during the change of administrators. The fee for this service is based upon a percentage of the administration fee multiplied by the initial enrollment for a period of three months, as indicated in the Dental Plan Costs under Additional Start-Up Costs. Claims will only be paid on the plan design covered under the Sun Life Administrative Services Agreement, not the prior plan's contract.

Dental ASO is an administrative service provided to employer sponsored, self-insured dental plans. It is not insurance.

## Assumptions

- A minimum of 10 employees is required at point of sale. If the enrollment of this group drops below 10 employees this proposal is not valid.
- A copy of the employer's Summary Plan Description for the plan that Sun Life administers is required.
- This quote is provided based upon information provided with the proposal request. It is intended for informational purposes and is not an offer to contract.
- The fees quoted in this proposal assume the group does not currently have an Administrative Services Agreement with Sun Life. However, if the group does currently have an Administrative Services Agreement with Sun Life, the fees quoted in this proposal are not valid.

**This dental plan does not provide coverage for pediatric oral health services that satisfies the requirements for “minimum essential coverage” as defined by the Patient Protection and Affordable Care Act. (“PPACA”).**

Dental ASO is an administrative service provided to employer sponsored, self-insured dental plans. It is not insurance.

# Group Vision

We are pleased to offer Vision plans and flexible benefits that can be easily paired to meet your group's vision needs. Here are the highlights:

- **Multiple Plan Designs<sup>1</sup>:** Employers can select from three different plans to meet their needs.
  - **Plan 1** – Coverage for an eye exam and discounts for materials
  - **Plan 2** – Employer coverage for an eye exam and an option for employees to purchase coverage for materials
  - **Plan 3** – Coverage for an eye exam and materials
- **Voluntary Vision:** Once a plan design is selected, employers can choose to offer the plan at 100% employee paid for a truly voluntary plan. All voluntary plans are equipped with a voluntary enrollment strategy to improve participation in the plan. Participation requirements apply.
- **Easy to Use:** No ID cards or claim forms are necessary
- **Nation's Largest Network:** Your plan comes with access to the largest network<sup>2</sup> of private-practice eyecare doctors in the U.S. through VSP®. With strong provider penetration and quality assurance controls, it's easy for employees to receive quality vision care.
- **Comprehensive Eye Exam Included:** A comprehensive eye exam is important because VSP doctors can detect signs for other health conditions such as diabetes and high blood pressure.
- **Laser Vision Correction:** Discounts are included with each of our plan options so employees can take advantage of laser surgery to correct farsightedness, nearsightedness, presbyopia or astigmatism.
- **Robust Online Services:** Employers with Sun Life Vision have access to Sun Life Connect, our user friendly portal for online plan administration. Your employees can create a Sun Life account to view explanation of benefits, find an eye care provider, learn about vision insurance, read about vision health, and more.
- **Benefit Tools:** Our mobile app provides members on the go access to find a vision provider, view their vision plan information, claims history and more. This mobile app is available for iOS and Android.

<sup>1</sup> Product offerings may not be available in all states and may vary depending on state laws and regulations.

<sup>2</sup> Information based on network analysis performed by Zelis as of April, 2022

# Group Vision

All Eligible Employees

Plan design and rates

Plan 3 design summary

Vision Plan Overview	
Eligible Employees	All Full-Time United States Employees working in the United States Who Are Scheduled To Work A Minimum Of 30 Hours Per Week
Effective Date	January 1, 2024
Plan Type	Plan 3
Locating a VSP doctor	A listing is available at <a href="http://vsp.com">vsp.com</a> or by calling 1.800.877.7195
Out-of-Network Providers	Members will receive a lesser benefit and should contact VSP at 1.800.877.7195 for more details.
Dependent Coverage Children	Children to age 26
Annual Enrollment Period	This plan includes an annual enrollment period, which provides an opportunity for late applicants to join the plan and allows for benefit changes.
Employee Coverage Contributions	Employee pays for a portion or all of the cost of Employee coverage
Dependent Coverage Contributions	Employee pays for a portion or all of the cost of Dependent coverage

Group Vision coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.



## Plan 3 Covered Expenses

Vision Insurance Schedule - Full Service			
Benefit	Frequency	In-Network Member Cost	Out-of-Network Benefit
Exam Services WellVision Exam®	1 per 12 months	\$10	Up to \$52
Laser Vision Correction Discount	Once per eye per lifetime	<ul style="list-style-type: none"> <li>Average 15% off the regular price or 5% off the promotional price.</li> <li>Discounts only available from contracted facilities.</li> </ul>	N/A
Lenses  Single Lined Bifocal Lined Trifocal Lenticular Necessary Contacts	1 per 12 months	\$10 (lenses and frame)	Up to \$55 Up to \$75 Up to \$95 Up to \$125 Up to \$210
Lens Enhancements  Standard progressive Premium progressive Custom progressive		No cost \$80 - \$90 copay \$120 - \$160 copay  Average savings of 35-40% on other lens enhancements	N/A
Frames <i>Includes a wide selection of frames at Walmart®.</i>	1 per 12 months	<ul style="list-style-type: none"> <li>\$130 for the frame of your choice and 20% off the amount over your allowance</li> <li>\$70 allowance at Costco®*</li> </ul>	Up to \$57
Elective Contact Lenses  <i>Contact lenses are in place of lenses and frame.</i>	1 per 12 months	<ul style="list-style-type: none"> <li>Up to \$60 / 15% savings for your contact lens exam (fitting and evaluation)</li> <li>\$130 for contact lenses</li> </ul>	Up to \$105
Additional Glasses and Sunglasses Discount	20% off additional glasses and sunglasses, including lens options, from the same VSP doctor on the same day as your exam. Or get 20% off from any VSP doctor within 12 months of your last exam.		N/A
Coverage with Retail Providers	*Coverage with retail providers may be different. Check with Costco® and Walmart® for VSP member pricing. The Costco allowance is equivalent to the allowance at preferred providers and other retail providers.		

Group Vision coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

## Vision Rates and Premium

	Total employees	Vision monthly rate	Total monthly premium
Employee only	89	\$9.90	\$881.10
Employee + spouse	23	\$17.50	\$402.50
Employee + child(ren)	16	\$18.80	\$300.80
Employee, spouse + child(ren)	36	\$26.80	\$964.80
Total	164		\$2,549.20

Sequence Number: 7

For illustration purposes, the total employee shown for each plan is based on data provided to us. Actual employee will vary at final enrollment.

Rates assume 243 eligible employees, with 164 participating or 67.5% participation. Upon sale, quoted rates and benefits may be adjusted based on achieved participation levels.

Sun Life reserves the right to adjust rates if final participation is more than 10% different from the participation provided at quote.

### Included in this Plan:

- Sun Life's 10% Graded broker commission
- 24-month rate guarantee from the Effective Date
- The rates quoted are based on the information provided to us at the time of proposal and reflect the risk presented and benefits requested at that time. Any change in our risk or any change in the benefits requested may result in a change of premium rates, a change in the plan offered, or a withdrawal of the proposal.

Group Vision coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

## Assumptions

- A minimum of 20% participation or 2 employees is required at point of sale. If the enrollment of this group drops below 2 employees this proposal is not valid.
- This fully insured plan will replace any VSP discount plan currently offered by Sun Life.
- Claim forms are not required for in-network vision providers.
- Assumes direct employer-employee relationship.
- If Experience is provided, any plan changes within the experience period must be disclosed at the time of quoting.
- Sun Life is assumed to be the sole provider of vision insurance to the employer named in this proposal.
- Notification of any employer-completed merger or acquisition.
- Standard Sun Life policy language, as filed in the policyholder's situs state, is offered. No special language or state filings are included unless approved in advance and policy provisions are subject to state requirements and availability.
- An employee must be Actively at Work on his/her Effective Date for coverage to become effective. If an employee is not Actively at Work on his or her Effective Date, coverage will not become effective until the employee is again Actively at Work. Continuity of coverage may apply for takeover plans.
- Common ownership of the business units.
- Sun Life requires a final census, which includes participation information for contributory/voluntary benefits, before the point of sale and reserves the right to re-rate the proposal upon verification of dates of birth, genders, salaries, individual benefit elections, and occupations.
- If post-enrollment review shows that the group did not meet all of the underwriting requirements, we reserve the right to re-rate retroactive to the Effective Date or terminate the contract.
- The rates quoted are based on the information provided to us at the time of proposal and reflect the risk presented and benefits requested at that time. Any change in our risk or any change in the benefits requested may result in a change of premium rates, a change in the plan offered, or a withdrawal of the proposal.
- This quote is provided based on information provided with the proposal request. It is intended for informational purposes and is not an offer to contract. The Employer may apply for the group vision insurance shown in this proposal. If the application is accepted by Sun Life, the final rates and benefits will be based on the enrollment census and the verification of the information provided with the rate request.
- Rates assume the group does not currently have vision coverage with Sun Life. However, if the group is currently covered under a Sun Life plan, the rates quoted in this proposal are not valid, and the renewal rates will apply instead. Please contact your Sun Life representative for more information about your renewal rates.

**This vision plan does not provide coverage for pediatric vision health services that satisfies the requirements for “minimum essential coverage” as defined by the Patient Protection and Affordable Care Act. (“PPACA”).**

Group Vision coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

# Accident insurance

Sun Life's Accident Plan provides accident insurance protection for a wide range of covered benefits. Injured employees and their dependents may use the cash benefits however they want—to satisfy deductibles, pay out-of-pocket medical expenses, or pay household bills, for example. Here are some highlights:

- **Guaranteed Issue.**
- **A Wide Range of Covered Benefits:** Benefits for injuries are payable once for each covered accident (unless stated otherwise in the certificate), and benefits for hospital stays and related care are payable up to a specific number of days or visits for each covered accident.
- **Categories of Coverage:**
  - **For Injuries:** Insureds will receive a payment for covered dislocations, fractures, lacerations, burns, and other injuries.
  - **For Diagnosis and Services:** Insureds will receive a payment for related covered medical services (ranging from X-rays to office visits), hospital services (including emergency room admissions and ambulance rides), surgeries and emergency dental (crown and extraction).
  - **For Loss:** The plan includes accidental death and dismemberment coverage and pays benefits for loss of hearing and for loss of sight occurring as a result of a covered accident.
- **Coverage for Families:** Employees can add coverage for spouses and dependent children.
- **Off Job or 24-Hour Coverage:** The plan can provide coverage at all times (24 hours) or for accidents that occur outside of work ("Off Job").
- **Wellness screening benefit:** To promote healthy lifestyles and early detection, we will pay employees a defined amount, once per calendar year, when we receive proof of an eligible health screening, like an electrocardiogram. We may also pay the employee for spouse or child screening (see Plan Design and Rates).
- **Portable:** Employees who terminate employment and who meet other eligibility criteria may apply to port accident insurance.

**Accident insurance is a limited benefit policy. It provides accident coverage only. It does not provide basic hospital, basic medical, or major medical insurance. The certificate and its riders have exclusions and limitations that may affect any benefits payable. Benefits payable are subject to all terms and conditions of the certificate. The policy, certificate, and any rider may not be available in all states.**

If permitted by the Employer's employee benefit plan and not prohibited by state law, or if the group's situs state is Oregon or Washington, the term "spouse" in this benefit includes any individual who is either recognized as a spouse, a registered domestic partner, or a partner in a civil union, or otherwise accorded the same rights as a spouse.

Group Accident Insurance is underwritten by  
Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series  
12-GP-01, 12-AC-C-01, 12-AC-R-01, 12-AC-R-02, 16-AC-C-01 and 16-ACPort-C-01 subject to state availability.

# Accident insurance

## Plan design and rates

### Accident Insurance plan design

Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 20 hours per week			
Effective Date	January 1, 2024			
Participation requirement	5 enrolled employees			
	Class 1			
Class description	All Eligible Employees			
Eligibility Waiting Period	First of the month following 30 days of employment			
Contributions	Contributory			
Member direct billing	Not included			
Covered benefits				
Life and Dismemberment Losses *	STANDARD		ENHANCED	
Accidental Death	\$15,000		\$25,000	
Accidental Death Common Carrier	\$30,000		\$100,000	
Catastrophic Loss: Both arms or both hands, both legs or both feet, one hand and one foot or one arm and one leg, or irrecoverable loss of sight of both eyes	\$15,000		\$25,000	
One hand, one foot, one leg, one arm	\$7,500		\$15,000	
Loss of sight of one eye or loss of one eye	\$7,500		\$15,000	
Two or more fingers or toes	\$1,500		\$3,000	
One finger or one toe	\$750		\$1,500	
Loss of hearing of one ear or loss of one ear	\$2,500		\$5,000	
Dislocations	STANDARD		ENHANCED	
	Open	Closed	Open	Closed
Hip	\$4,000	\$2,000	\$8,000	\$4,000
Knee, ankle, or bones of the foot	\$2,000	\$1,000	\$3,000	\$1,500
Elbow, wrist or Lower jaw	\$800	\$400	\$2,000	\$1,000
Shoulder	\$1,000	\$500	\$2,000	\$1,000
Collarbone or bones of the hand	\$1,600	\$800	\$2,000	\$1,000
Finger(s) or toe(s)	\$200	\$100	\$400	\$200
Fractures	STANDARD		ENHANCED	

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12-GP-01, 12-AC-C-01, 12-AC-R-01, 12-AC-R-02, 16-AC-C-01 and 16-ACPort-C-01 subject to state availability.

	Open	Closed	Open	Closed
Hip or thigh	\$4,000	\$2,000	\$6,000	\$3,000
Skull-depressed	\$6,000	\$3,000	\$7,500	\$3,750
Skull-simple	\$3,000	\$1,500	\$4,000	\$2,000
Vertebral processes, Bones of the face, Nose, Lower jaw, Collarbone, Shoulder, Forearm, Hand, Wrist, Foot, Ankle, Kneecap, Elbow or Heel	\$700	\$350	\$1,500	\$750
Leg	\$2,000	\$1,000	\$3,000	\$1,500
Vertebrae, Sternum or Pelvis	\$1,600	\$800	\$2,400	\$1,200
Upper jaw or upper arm	\$800	\$400	\$1,500	\$750
Rib, Finger, Toe or Coccyx	\$400	\$200	\$600	\$300
Multiple ribs	\$1,000	\$500	\$1,500	\$750
<b>Additional Injuries</b>	<b>STANDARD</b>		<b>ENHANCED</b>	
Eye Injury - surgical repair	\$200		\$300	
Eye Injury - object remove	\$200		\$300	
Brain injury	\$500		\$500	
Paralysis—paraplegia	\$5,000		\$12,500	
Paralysis—quadriplegia	\$10,000		\$20,000	
Coma	\$5,000		\$10,000	
Concussion	\$100		\$200	
<b>Lacerations</b>	<b>STANDARD</b>		<b>ENHANCED</b>	
No sutures and treated by doctor	\$20		\$35	
Single laceration under 5 cm with sutures	\$35		\$65	
5-15 cm with sutures (total of all lacerations)	\$125		\$250	
Greater than 15 cm with sutures (total of all lacerations)	\$500		\$700	
<b>Burns</b>	<b>STANDARD</b>		<b>ENHANCED</b>	
	<b>2nd Degree</b>	<b>3rd Degree</b>	<b>2nd Degree</b>	<b>3rd Degree</b>
20-40 square centimeters	\$200	\$500	\$300	\$750
40-65 square centimeters	\$400	\$1,000	\$600	\$1,500
65-160 square centimeters	\$600	\$3,000	\$800	\$4,500
160-225 square centimeters	\$800	\$7,000	\$1,200	\$10,000
More than 225 square centimeters	\$1,000	\$10,000	\$1,500	\$15,000
Skin graft	50% of the applicable Burn Benefit		50% of the applicable Burn Benefit	

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Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series  
12-GP-01, 12-AC-C-01, 12-AC-R-01, 12-AC-R-02, 16-AC-C-01 and 16-ACPort-C-01 subject to state availability.



<b>Medical Services</b>	<b>STANDARD</b>	<b>ENHANCED</b>
Diagnostic Exam Arteriogram, Angiogram, CT, CAT, EKG, EEG, or MRI (1 time per benefit year)	\$100	\$200
Diagnostic Exam X-ray (1 time per covered accident)	\$50	\$100
Accident Emergency Treatment, non- emergency room (once per covered accident)	\$100	\$200
Physician's Follow-up Treatment office visit (per visit, up to 6 times per covered accident)	\$50	\$100
Physical Therapy (per visit up to 10 visits per covered accident)	\$25	\$50
Medical Devices	\$200	\$400
Epidural Pain Management (up to 2 times per covered accident)	\$50	\$100
Prescription drug	\$15	\$35
Prosthesis (one)	\$500	\$750
Prosthesis (two)	\$1,000	\$1,500
Blood, Plasma, or Platelet Transfusion	\$100	\$200
<b>Hospital</b>	<b>STANDARD</b>	<b>ENHANCED</b>
Hospital Admission (once per benefit year)	\$1,000	\$1,500
Hospital Confinement (per day up to 365 days per covered accident)	\$200	\$300
Intensive Care Unit Admission (once per Benefit Year; payable instead of Hospital Admission benefit if Confined immediately to ICU)	\$1,500	\$2,000
Intensive Care Unit Confinement (per day up to 14 days, payable in addition to any Hospital Confinement benefit)	\$200	\$300
Ambulance (Ground)	\$300	\$400
Ambulance (Air)	\$1,000	\$1,500
Emergency Room Admission	\$100	\$200
Family Lodging (per day up to 30 days per benefit year)	\$50	\$100
Transportation (100 or more miles up to 3 times per covered accident)	\$250	\$500
Rehabilitation Unit (per day up to 30 days per covered accident)	\$50	\$100
<b>Surgery</b>	<b>STANDARD</b>	<b>ENHANCED</b>
Miscellaneous Surgery requiring general anesthesia (not covered by any other benefit)	\$300	\$750
Open Surgery	\$1,000	\$1,500
Exploratory Surgery or Debridement	\$250	\$500
Tendon/Ligament/Rotator Cuff Tear	\$500	\$750
Torn Knee Cartilage	\$500	\$750
Ruptured/Herniated Disc	\$500	\$750

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12-GP-01, 12-AC-C-01, 12-AC-R-01, 12-AC-R-02, 16-AC-C-01 and 16-ACPort-C-01 subject to state availability.

<b>Emergency Dental</b>	<b>STANDARD</b>	<b>ENHANCED</b>
Emergency Dental extraction	\$30	\$65
Emergency Dental crown	\$100	\$200
<b>Wellness</b>	<b>STANDARD</b>	<b>ENHANCED</b>
Wellness Screening Benefit (once per benefit year)	\$50	\$50

Unless otherwise specified, the above benefits will be payable only once for each Covered Accident as applicable.

\* Life and dismemberment losses: Benefits displayed are payable for the employee only. Spouse benefits are 100% of the employee benefit amount for death and 100% of the employee benefit amount for dismemberment. Dependent children benefits are 50% of the employee benefit amount for death and 50% of the employee benefit amount for dismemberment.

Group Accident Insurance is underwritten by  
Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series  
12-GP-01, 12-AC-C-01, 12-AC-R-01, 12-AC-R-02, 16-AC-C-01 and 16-ACPort-C-01 subject to state availability.

## Accident Plan monthly rates

	STANDARD		ENHANCED	
	Off Job	24-Hour	Off Job	24-Hour
Employee only	\$8.43	\$11.11	\$12.26	\$16.97
Employee and Spouse	\$13.10	\$18.28	\$20.53	\$29.66
Employee and Children	\$15.45	\$21.88	\$24.60	\$35.91
Employee and Family	\$20.12	\$29.05	\$32.87	\$48.60

Sequence Number: 9

**Please select either 24-Hour or Off Job coverage.**

### Included in this plan:

- 36-month rate guarantee from the Effective Date.
- Portability
- Coverage options
  - Employee, spouse, and dependent children

Group Accident Insurance is underwritten by  
Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series  
12-GP-01, 12-AC-C-01, 12-AC-R-01, 12-AC-R-02, 16-AC-C-01 and 16-ACPort-C-01 subject to state availability.

## Assumptions

- Standard Sun Life policy and contractual language, as filed in the policyholder's situs state, is offered. No special language or state filings are included unless approved in advance. Policy provisions are subject to state requirements and availability.
- An employee must be Actively at Work on his/her Effective Date for coverage to become effective. If an employee is not Actively at Work on his or her Effective Date, coverage will not become effective until the employee is again Actively at Work.
- Common ownership of the business units.
- This proposal assumes that there is a direct employer-employee relationship.
- Notification of any employer-completed merger or acquisition.
- Retired, temporary, part-time, seasonal, leased, and contracted (1099) employees are not eligible to participate.

This proposal assumes there is no coverage currently in force.

- No person may be insured as a Dependent Child of more than one Employee.
- No person may be insured as an Employee and as a spouse of an Employee.
- A minimum of 5 enrolled employees is required at point of sale. Proposals will not be valid if there are less than 5 enrolled employees.

Group Accident Insurance is underwritten by  
Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series  
12-GP-01, 12-AC-C-01, 12-AC-R-01, 12-AC-R-02, 16-AC-C-01 and 16-ACPort-C-01 subject to state availability.

# Critical Illness

Critical Illness insurance helps protect employees and their families from financial loss by providing a lump-sum benefit upon diagnosis of a covered condition. Here are some highlights:

- If included in the sold plan, we will pay a benefit for covered conditions like heart attack, stroke, major organ failure, occupational infectious disease, and coronary artery bypass graft.
- Cancer coverage may include invasive and non-invasive cancers as well as skin cancer. Cancer may be standalone or offered with standard core benefits.
- For dependent children, we also offer a childhood conditions option that may include Down Syndrome, cerebral palsy, complex congenital heart disease, cystic fibrosis, spina bifida, cleft lip/palate, type 1 diabetes, and muscular dystrophy.
- You may also choose to include supplemental benefits such as:
  - Option 1 – blindness, loss of speech and loss of hearing
  - Option 2 – benign brain tumor, paralysis, coma and burns
  - Option 3 – Alzheimer's, Parkinson's, and ALS

Benefits may not be available in every state. For the full list of covered conditions quoted, please refer to the Plan Design and Rates section of this proposal.

- **Benefit Percentages and Maximums:** Depending on the diagnosis, we will pay either the full benefit or a partial benefit. We will also pay for additional occurrences after a certain waiting period, as long as those diagnoses are not for the same covered condition for which we previously paid a benefit. Each covered condition is payable 1x per lifetime of the Policy, unless Recurrence has been selected. See plan design section for specific benefit percentages and any applicable policy maximums.
- **Recurrence Benefit:** For certain benefits, we will pay a lump-sum benefit to Insureds diagnosed with a covered condition for which we previously paid a benefit. The diagnosis must be for a new event (not a re-diagnosis of the covered condition previously paid for), and a certain number of months must pass between diagnoses. Certain covered conditions require that specific criteria be met in order for a Recurrence Benefit to be paid. Please refer to the Plan Design and Rates section for more details.
- **Coverage for Families:** Employees can add coverage for spouses and dependent children.
- **Health Care Support Services:** Sun Life has partnered with ComPsych® to provide a 24x7 service to help employees navigate medical plans and benefits. Expert benefits and claims specialists and registered nurses help employees understand medical coverage, provide guidance on claims, offer information about their medical diagnosis and treatment choices, and give practical resources and support.<sup>2</sup>
- **Wellness Screening Benefit:** To promote healthy lifestyles and early detection, we will pay employees a defined amount, once per calendar year, when we receive proof of an eligible health screening, like an electrocardiogram. We may also pay the employee for spouse or child screening (see Plan Design and Rates).
- **Portability:** Insureds may port an amount up to their remaining amount of insurance in force under the qualifying group insurance policy on the date such insurance terminates.

Group Critical Illness coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 12-GP-01, 12-SD-C-01, 13-SD-C-01, 16-SD-C-01, 15-GP-01, 12-SDPort-C-01, 13-SDPort-C-01, 16-SDPort-C-01, 12-SD-R-01 and 13-SD-R-01, subject to state availability.

**Critical Illness insurance is a limited benefit policy. It does not provide basic hospital, basic medical, or major medical insurance and does not satisfy the requirement for Minimum Essential Coverage under the Affordable Care Act. The certificate has exclusions and limitations (as detailed in the Policy Disclosures) which may affect any benefits payable. Benefits payable are subject to all terms and conditions of the certificate. The policy and certificate may not be available in all states and may vary based on state laws and regulations.**

If permitted by the Employer's employee benefit plan and not prohibited by state law, or if the group's situs state is Oregon or Washington, the term "spouse" in this benefit includes any individual who is either recognized as a spouse, a registered domestic partner, or a partner in a civil union, or otherwise accorded the same rights as a spouse.

Footnote information is located in the General Disclosures section on the last page of this proposal.

Group Critical Illness coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 12-GP-01, 12-SD-C-01, 13-SD-C-01, 16-SD-C-01, 15-GP-01, 12-SDPort-C-01, 13-SDPort-C-01, 16-SDPort-C-01, 12-SD-R-01 and 13-SD-R-01, subject to state availability.

# Critical Illness

## Plan design and rates

Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 20 hours per week		
Effective Date	January 1, 2024		
	<b>Class 1</b>		
Class description	All Eligible Employees		
	EMPLOYEE	SPOUSE	CHILD
Benefit amount	Benefit amounts may range from \$5,000 to \$20,000 in \$5,000 increments.	Benefit amounts may range from \$5,000 to \$20,000 in \$5,000 increments.  Amount cannot exceed 100% of the employee amount.	Benefit amounts may range from \$2,500 to \$10,000 in \$2,500 increments.  Amount cannot exceed 50% of the employee amount.
Guaranteed issue amount	\$20,000	\$20,000	\$10,000
Eligibility waiting period	First of the month following 30 days of employment	N/A	N/A
Contributions	Contributory	Contributory	Contributory
Member direct billing	Not included	Not included	Not included
Employer contribution	0%	0%	0%
Participation requirement	15%	N/A	N/A
Policy issue requirement	5 enrolled employees	N/A	N/A

	<b>Class 1</b>	
Class description	All Eligible Employees	
	<b>Initial Diagnosis</b>	<b>Recurrence</b>
<b>Core conditions</b>		
Heart attack	100%	100% of face amount
Stroke	100%	100% of face amount
Major organ failure	100%	100% of face amount
End-stage kidney disease	100%	100% of face amount
Occupational HIV/Hepatitis B, C, or D	100%	N/A
Coronary artery bypass graft	25%	25% of face amount
Angioplasty	25%	25% of face amount
<b>Cancer conditions</b>		
Invasive cancer	100%	100% of face amount
Non-invasive cancer	25%	25% of face amount
Skin cancer	25%	25% of face amount
<b>Supplemental conditions option 1</b>		
Complete blindness	100%	N/A
Loss of speech	100%	N/A
Complete loss of hearing	100%	N/A
<b>Supplemental conditions option 2</b>		
Benign brain tumor	100%	N/A
Paralysis	100%	N/A
Coma	100%	N/A
Severe burns	100%	N/A

Group Critical Illness coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 12-GP-01, 12-SD-C-01, 13-SD-C-01, 16-SD-C-01, 15-GP-01, 12-SDPort-C-01, 13-SDPort-C-01, 16-SDPort-C-01, 12-SD-R-01 and 13-SD-R-01, subject to state availability.

Supplemental conditions option 3		
Advanced ALS or Lou Gehrig's disease	100%	N/A
Advanced Alzheimer's	25%	N/A
Advanced Parkinson's	25%	N/A
Childhood conditions - child only		
Down syndrome	100%	N/A
Cerebral palsy	100%	N/A
Cystic fibrosis	100%	N/A
Cleft lip/palate	100%	N/A
Type 1 diabetes mellitus	100%	N/A
Muscular dystrophy	100%	N/A
Complex congenital heart disease	100%	N/A
Spina bifida	100%	N/A
Wellness benefit		
Annual wellness screening benefit	Employee: \$50 Spouse: \$50 Child: \$50	
Additional Provisions:		
Maximum benefit	1 time per condition	
Recurrence maximum	Unlimited	
Pre-existing conditions limitation	6/6	

Group Critical Illness coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA)  
under Policy Form Series 12-GP-01, 12-SD-C-01, 13-SD-C-01, 16-SD-C-01, 15-GP-01, 12-SDPort-C-01, 13-SDPort-C-01, 16-SDPort-C-01, 12-SD-R-01  
and 13-SD-R-01, subject to state availability.



## Critical Illness rates

### Class 1

Employee benefit		
Age band	Tobacco Monthly rate*	Non-Tobacco Monthly rate*
Under age 25	\$0.42	\$0.41
25-29	\$0.49	\$0.45
30-34	\$0.62	\$0.56
35-39	\$0.88	\$0.72
40-44	\$1.48	\$1.07
45-49	\$2.56	\$1.65
50-54	\$3.97	\$2.37
55-59	\$5.83	\$3.28
60-64	\$8.67	\$4.59
65-69	\$12.73	\$6.43
70-74	\$17.34	\$8.89
75 and over	\$21.72	\$12.29

Rate basis: Per \$1,000 of coverage

\*Attained age rating applies – premiums will increase due to age increase.

### Class 1

Spouse benefit		
Age band**	Tobacco*** Monthly rate*	Non-Tobacco*** Monthly rate*
Under age 25	\$0.47	\$0.46
25-29	\$0.54	\$0.50
30-34	\$0.69	\$0.62
35-39	\$0.98	\$0.80
40-44	\$1.64	\$1.19
45-49	\$2.84	\$1.83
50-54	\$4.41	\$2.63
55-59	\$6.48	\$3.64
60-64	\$9.63	\$5.10
65-69	\$14.14	\$7.14
70-74	\$19.27	\$9.88
75 and over	\$24.13	\$13.66

Rate basis: Per \$1,000 of coverage

\*Attained age rating applies – premiums will increase due to age increase.

\*\*The employee's age is used to determine rates.

\*\*\*Rates are based on spouse's tobacco use.

### Class 1

Child benefit	
Coverage	Monthly rate
All age bands	\$0.51

Rate basis: Per \$1,000 of coverage

Sequence Number: 15

Group Critical Illness coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA)  
under Policy Form Series 12-GP-01, 12-SD-C-01, 13-SD-C-01, 16-SD-C-01, 15-GP-01, 12-SDPort-C-01, 13-SDPort-C-01, 16-SDPort-C-01, 12-SD-R-01  
and 13-SD-R-01, subject to state availability.

## Important Information

Please also refer to the Policy Disclosures for additional details.

Note Regarding Employees Covered or Considering Coverage under Health Savings Accounts (HSA) Established in Connection with High Deductible Health Plans (HDHP):

Based on the limited available regulatory guidance, Sun Life believes its Critical Illness insurance is appropriate for use with an HSA and may be purchased when the employee and/or their family members are covered under an HDHP. However, Sun Life cannot provide legal or tax advice. If there are legal or tax questions, we suggest that the employee consult their own legal or tax advisor before purchasing this insurance.

### Included in this plan:

- 36-month rate guarantee from the Effective Date
- Employee must be insured in order to elect benefits for Dependents
- Eligible Child(ren): to age 26.
- Health care support services
- Portability - no age limit

Group Critical Illness coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 12-GP-01, 12-SD-C-01, 13-SD-C-01, 16-SD-C-01, 15-GP-01, 12-SDPort-C-01, 13-SDPort-C-01, 16-SDPort-C-01, 12-SD-R-01 and 13-SD-R-01, subject to state availability.

## Assumptions

- Standard Sun Life policy and contractual language, as filed in the policyholder's situs state, is offered. No special language or state filings are included unless approved in advance. Policy provisions are subject to state requirements and availability.
- This proposal assumes that there is a direct employer-employee relationship
- An employee must be Actively at Work on his/her Effective Date for coverage to become effective. If an employee is not Actively at Work on his or her Effective Date, coverage will not become effective until the employee is again Actively at Work.
- Coverage for dependents who are hospital-confined due to illness or injury will be effective on the date they are no longer hospital-confined. Hospital-confined does not apply to a newborn child.
- Sun Life requires a final census, which includes participation information for contributory/voluntary benefits, before the point of sale and reserves the right to re-rate the proposal upon verification of dates of birth, genders, salaries, individual benefit elections, and occupations.
- Common ownership of the business units.
- This proposal assumes there is no coverage currently in force.
- Notification of any employer-completed merger or acquisition.
- Retired, temporary, part-time, seasonal, leased, and contracted (1099) employees are not eligible to participate.
- No person may be insured as a Dependent Child of more than one Employee.
- No person may be insured as an Employee and as a spouse of an Employee.
- The greater of 5 lives or 15% participation is required at point of sale. If participation is not achieved, this proposal is not valid, and Sun Life reserves the right to decline the case.

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## MEET MAXWELL: A new offering through Sun Life

Sun Life is excited to provide access to Maxwell Health, an easy-to-use technology platform that makes managing employee benefits simple and effective.

### Why Maxwell? You get:

- Access to technology for year-round benefits and HR simplification
- Ease of paperless administration for all of your client's benefits – plus, it's easy to add new voluntary benefits without the headache of eligibility and enrollment management
- Intuitive employee enrollment experience and convenient access to benefits information via web and mobile
- Access to the Marketplace, a curated suite of lifestyle and financial benefits that can be easily implemented through the Maxwell platform



### What does it cost?

Starts at \$4.50 per employee, per month (PEPM)\*

Placing additional Sun Life benefits can lower the PEPM fee - even to **\$0.\*\***

### That includes:

- Full-service implementation and renewal on the technology platform and with Sun Life
- EDI connection with your medical carrier
- EDI connections for all Sun Life insurance products
- EDI connections for other non-medical carriers' products
- Training and support during onboarding, and ongoing

\*Discounted prices are not available in NY and WA.

\*\*The PEPM fee is separate from insurance premiums, which may include administrative charges related to use of the platform. Pricing and access to the platform are dependent upon a signed broker agreement being in place.

\*Additional charges to apply for: groups with 26-49 employees, one-to-one or telephonic enrollment support. This advertisement is not approved for use in New York or Washington.

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Take your benefits to the next level with Sun Life and Maxwell:  
**[info.maxwellhealth.com/sun-life](https://info.maxwellhealth.com/sun-life)**

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# Disclosures

## Policy Disclosures

### Life and AD&D

The group policy, which is described in this proposal, may include exclusions. Exclusions may prevent any benefits from being payable based on certain circumstances. For life insurance, subject to state variations, these circumstances may include suicide, and for AD&D insurance, subject to state variations, they may include intentionally self-inflicted injuries, war, active participation in a riot, committing or attempting to commit a criminal act, injury sustained from any aviation activities (other than riding as a fare-paying passenger), bodily or mental infirmity or disease of any kind, infection unless due to an accidental cut or wound, voluntary use of any controlled substance, or operation of any motorized vehicle while intoxicated.

The Accelerated Benefit is not long term care insurance. It will reduce the total amount of your life insurance benefit payable under the Policy by the amount of the accelerated payment. Receipt of an Accelerated Benefit may be taxable; you should consult your tax advisor for specific advice. Receipt of an Accelerated Benefit may affect your eligibility for public assistance programs.

The above material is provided for informational purposes only, and the exclusions may vary by policy issue state. For a complete list of exclusions, please refer to the policy documents.

### Long-Term Disability

The group policy, which is described in this proposal, may include limitations and exclusions.

Limitations may limit the amount of benefits payable for certain conditions, such as mental illness or drug- and alcohol-related illnesses. They may also outline circumstances under which no benefits are payable, such as when the employee is not under the regular and continuing care of a physician providing appropriate treatment by means of examination and testing in accordance with the disabling condition, any period during which the employee fails to submit to a medical examination as requested by Sun Life, or any period the employee is incarcerated.

Exclusions may prevent any benefits from being payable based on certain circumstances. These circumstances may include disabilities arising from self-inflicted injuries, war, active participation in a riot, committing or attempting to commit a criminal act or a pre-existing condition. (A pre-existing condition is defined as a condition for which, during the lookback period prior to the employee's Effective Date of insurance or in some cases the Effective Date of an increase in coverage, the employee received medical treatment, consultation, care, or services, including diagnostic measures, or took prescribed drugs or medicines.)

The above material is provided for informational purposes only, and the exclusions and limitations may vary by policy issue state. For a complete list of exclusions and limitations, please refer to the policy documents.

### Dental Limitations and Exclusions

The group policy, which is described in this proposal, may include exclusions. Exclusions may prevent expenses from being covered based on certain circumstances. The following expenses may not be covered:

- procedures not performed by a licensed dentist
- procedures not listed as covered dental expenses

- dental care for injuries that are work-related, self-inflicted, or not caused by an accident
- orthognathic surgery
- dental care resulting from active participation in a riot or commission of a felony
- experimental treatment, oral hygiene, plaque-control programs, and dietary instruction
- dental care for injuries sustained as a result of war or act of war
- charges for pulp caps
- charges for pulpal therapy
- charges for stainless steel crowns
- charges for fluoride treatments
- charges for sealants
- charges for space maintainers
- dental expenses incurred while coverage is not in force
- charges for care, treatment, services, or supplies to the extent that any benefit is provided by Medicare
- charges not customarily made when there is no insurance or charges for which there is no legal obligation to pay
- charges for failure to keep appointments
- replacement or repair of lost, stolen, or damaged prosthetic or orthodontic appliance
- additional services, such as orthodontia and/or surgical implants, are not covered, unless specifically listed under covered services.
- charges for diagnostic services and treatment of jaw joint problems, such as temporomandibular joint disorders, by any method unless specifically covered under the Certificate.

Other limitations that are plan specific may apply. Please review the Design & Rates section for information on the specific limitations associated to each plan. Other exclusions may apply, please see your certificate for a complete list.

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## Vision

### Exclusions

Covered vision expenses do not include, and no benefits are provided for the following:

- Orthoptics or vision training and any associated supplemental testing.
- Plano lenses (lenses with refractive correction of less than + .50 diopter)
- Two pairs of glasses, in lieu of bifocals.
- Replacement of lenses and frames furnished under the Policy which are lost or broken, except at the normal intervals when services are otherwise available.
- Medical or surgical treatment of the eyes.
- Services and/or materials not shown as covered vision expenses in the Benefit Highlights or Covered Vision Benefits.
- Replacement of lost or damaged contact lenses, except at the normal intervals when services are otherwise available.

- Contact lens insurance policies or service agreements.
- Refitting of contact lenses after the initial (90-day) fitting period.
- Additional office visits associated with contact lens pathology.
- Contact lens modification, polishing or cleaning.
- Services associated with CRT or Orthokeratology.

## Limitations

- In no event will coverage exceed the lesser of the actual cost of the examination or materials or the limits of coverage shown in the Benefit Highlights.
- The allowance for lenses shown in the Benefits Highlights is for two lenses. If only one lens is needed, coverage will be 50% of the allowance shown for two lenses.
- Benefits will not be payable for replacement of lost or broken materials until the next eligible benefit period.
- The policy is designed to cover visually necessary materials rather than cosmetic materials. When the insured selects any of the following extras, the policy will pay the basic cost of the allowed lenses, and the insured will pay the additional costs for the options.
  - Optional cosmetic processes.
  - Anti-reflective coating.
  - Color coating.
  - Mirror coating.
  - Blended lenses.
  - Cosmetic lenses.
  - Laminated lenses.
  - Oversize lenses.
  - Progressive lenses.
  - Photochromic lenses; tinted lenses except Pink #1 and Pink #2.
  - UV (ultraviolet) protected lenses.
  - A frame that costs more than the plan allowance.
  - Contact lenses (except as noted in the Benefit Highlights).

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## Accident insurance

The following exclusions and limitations may vary by plan and by state laws and regulations.

### Exclusions

No benefits will be payable for any loss that is the result of a Covered Accident that is due to or results from:

- war or any act of war [or your active duty in any armed service during a time of war] (this does not include acts of terrorism);
- active participation in a war (declared or undeclared);
- active military duty;
- riding in or driving any motor-driven vehicle in a race, stunt show, speed test or driving while Intoxicated;
- Intoxication;



- operating, learning to operate, serving as a crew member of, jumping or falling from any aircraft, including those which are not motor-driven. This does not include:
  1. flying as a fare paying passenger in a scheduled or chartered flight operated by a commercial airline;
  2. flying as a passenger with no duties on board an aircraft operated by a private business to transport its personnel or guests;
  3. flying in [your Employer's] corporate aircraft as a passenger or crew member; or
  4. flying in a life-saving medevac or similar medical air transport service;
- Injuries sustained from any aviation activities, other than riding as a fare paying passenger;
- operating a taxi or any other delivery service for any kind of compensation or profit;
- engaging in hang-gliding, bungee jumping, parachuting, sail gliding, parasailing, parakiting or mountaineering;
- participating in or practicing for any semi-professional or professional competitive athletic contest in which any compensation is received, including coaching or officiating;
- committing of or attempting to commit an assault, felony or other criminal act;
- active Participation in a Riot, Rebellion or Insurrection;
- committing or attempting to commit suicide, whether sane or insane, or injuring oneself intentionally;
- voluntary use of any controlled substance as defined in Title II of the Comprehensive Drug Abuse Prevention and Control Act of 1970, as now or hereafter amended, unless administered on the advice of a Physician and used as directed;
- use of any drug, unless used as prescribed by a Physician or as directed;
- improper or illegal use of inhalants or huffing;
- a Sickness or infection including physical or mental condition which is not caused solely by or as a direct result of a Covered Accident;
- incarceration in a penal institution of any kind;
- An Injury arising out of or in the course of any work for pay or profit. This exclusion will not apply to an Insured who is enrolled for 24-Hour Coverage.

For plans that include a Wellness Screening benefit, the benefit is limited to the following tests: cardiac exercise stress test, fasting blood glucose test, blood test for lipids including total cholesterol, LDL, HDL and triglycerides, breast cancer screening (clinical breast exam, mammography, MRI, thermography, ultrasound), CA 15-3 (blood test for breast cancer), CA 125 (blood test for ovarian cancer), CEA (blood test for colon cancer), chest x-ray, colorectal cancer screening (fecal occult blood test, colonoscopy, sigmoidoscopy), hemocult stool analysis, pap smear, prostate cancer screening (digital rectal exam, PSA blood test), serum protein electrophoresis, skin cancer screening, diabetes tests (fasting blood glucose test, hemoglobin A1c), carotid doppler, electrocardiogram, echocardiogram, immunizations, and interscholastic sports physical exams. In order to receive this benefit, documentation from the physician for the covered employee or dependent (if applicable) must be submitted. Tests may vary by state.

## Critical Illness Insurance

The following exclusions and limitations may vary by plan and by state laws and regulations.

The material below is provided for informational purposes only, and the exclusions and limitations may vary by policy issue state. For a complete list of exclusions and limitations, please refer to the policy documents.

### Exclusions

In addition to the exclusions stated in the Covered Conditions section of the Certificate, we will not pay any benefit that is caused by, contributed to in any way, or resulting from any Critical Illness condition diagnosed outside the United States or Canada without confirmation of the diagnosis by the type of Specialist Physician specified for each of the Covered Conditions in the certificate who practices in the United States or Canada.

We will not pay a benefit for any Critical Illness that is due to or results from services or treatment not included in the Benefit Highlights; treatment or complications of treatment not related to a Critical Illness; intentionally self-inflicted injuries; war or any act of war or your active duty in any armed service during a time of war (this does not include acts of terrorism); committing or attempting to commit an assault, felony, or other criminal act; being legally intoxicated or under the influence of any narcotic unless taken on the advice of a Physician and taken as prescribed.

Covered Conditions have specific diagnostic criteria that must be met (along with supporting documentation) for a benefit to be paid. For detailed information regarding covered conditions, please request an outline of coverage.

### **Limitations**

In addition to the limitations stated in the Covered Conditions section of the Certificate, we will not pay any benefit for any Critical Illness that is diagnosed in the first exclusionary period following the effective date of any Insured's insurance and results from a Pre-Existing Condition.

**Pre-Existing Condition** means during the exclusionary period prior to any Insured's effective date of insurance or the effective date of an increase in any Insured's amount of insurance, any condition for which any Insured:

- sought medical treatment, consultation, advice, care or services, including diagnostic measures for the condition, or symptoms related to the condition, regardless of whether the condition was Diagnosed or suspected at that time; or
- took prescribed drugs or medicines for the condition.

When newborn children, newly placed foster children or newly adopted children are added to Dependent Children Insurance within a certain number of days (as noted in the certificate) of birth, placement or adoption, the Pre-Existing Condition limitation does not apply.

For plans that include a Wellness Screening benefit, the benefit is limited to the following tests: cardiac exercise stress test, fasting blood glucose test, blood test for lipids including total cholesterol, LDL, HDL and triglycerides, breast cancer screening (clinical breast exam, mammography, MRI, thermography, ultrasound), CA 15-3 (blood test for breast cancer), CA 125 (blood test for ovarian cancer), CEA (blood test for colon cancer), chest x-ray, colorectal cancer screening (fecal occult blood test, colonoscopy, sigmoidoscopy), hemocult stool analysis, pap smear, prostate cancer screening (digital rectal exam, PSA blood test), serum protein electrophoresis, skin cancer screening, diabetes tests (fasting blood glucose test, hemoglobin A1c), carotid doppler, electrocardiogram, echocardiogram, immunizations, and interscholastic sports physical exams. In order to receive this benefit, documentation from the physician for the covered employee or dependent (if applicable) must be submitted. Tests may vary by state.

Other limitations that are plan specific may apply. Please review the Design & Rates section for information on the specific limitations associated to each plan.

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# General Disclosures

1. For current financial ratings, please visit [www.sunlife.com](http://www.sunlife.com).

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2. Value-added services are not insurance, are offered only on specific lines of coverage, and carry a separate charge, which is added to the cost of the insurance. The cost is included in the total amount billed. Self Care+ is provided by AbleTo. Emergency Travel Assistance is provided by Assist America®. Identity Theft Protection is provided by SecurAssist®, an Assist America program. ComPsych® is a registered trade mark of ComPsych Corporation. The entities that provide the value-added services are not subcontractors of Sun Life and Sun Life is not responsible or liable for the care, services, or advice provided by them. Sun Life reserves the right to discontinue any of the Services at any time. Employers who provide group insurance coverage and make available value added services within an I.R.C. Section 125 cafeteria plan should consult a tax professional to determine whether those services are Qualified Benefits for Section 125 plans.

Service guarantees: If we do not meet the terms of a guarantee, a policyholder may request in writing a service guarantee review. Sun Life will determine whether it failed to meet the guarantee and whether a payment is made. If the request is approved, payment will be made by check during the policy year, as long as the policy remains in force during this time. Sun Life’s maximum liability under a guarantee for any policy year is limited to the lesser of 3% of the policyholder’s annual premium or \$5,000 for each line of coverage. The maximum payment for a breach of any one component of a guarantee is one-third of the maximum liability (lesser of 1% or \$1,667). If a policyholder has more than one line of insurance coverage, the Overall Satisfaction component will be paid under the guarantee under which the service issue arises. Please note the Service Guarantees apply to Life, STD (including ASO), LTD and Dental (including ASO). For ASO contracts, service guarantee payments will be based on the annual service fee. Service Guarantees are not available for Stop Loss, Accident, Critical Illness, Cancer, Hospital Indemnity or Gap.

Group insurance policies are underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) in all states, except New York, under Policy Form Series 93P-LH, 15-GP-01, 98P-ADD, 07-SL REV 7-12, 07P-LH-PT/07C-LH-PT, 01P-ADD-PT/01C-ADD-PT, GP-A, GC-A, 12-GP-01, 16-DEN-C-01, 12-DI-C-01, 16-DI-C-01, 13-SD-C-01, 12-AC-C-01, 16-AC-C-01, 16-ACPort-C-01, 13-ADD-C-01, 15-ADD-C-01, 12-GPPort-P-01, 13-ADDPort-C-01, 12-STDPort-C-01, ACPort-C-01, 13-SDPort-C-01, 16-SD-C-01, 16-SDPort-C-01, 16-CAN-C-01, 16-CANPort-C-01, 15-LF-C-01, 15-LFPort-C-01, 16-VIS-C-01, TDBPOLICY-2006, TDI-POLICY, 20-HI-C-01, 12-GPPort-P-01, 20-HIORT-C-01, 21-PFML-GP-01-CT and 20-PFML-GP-01-MA. In New York, group insurance policies are underwritten by Sun Life and Health Insurance Company (U.S.) (Lansing, MI) under Policy Form Series 15-GP-01, 13-GP-LF-01, 13-LF-C-01, 13-GP-LH-01, 13-ADD-C-01, 12-DI-C-01, 13-LTD-C-01, 13-STD-C-01, 06P-NY-DBL, 06P-NY-DBL-R-PFL, 07-NYSL REV 7-12, GC-A, GP-A, 12-GP-SD-01, 13-SD-C-01, 12-GP-01, 12-AC-C-01, 12-GPPort-01, 13-LFPort-C-01, 13-ADDPort-C-01, 15-LF-GP-01, 15-SD-GP-01, 12-STDPort-C-01, 12-ACPort-C-01 and 13-SDPort-C-01. Prepaid dental products are provided and administered by Sun Life Assurance Company of Canada (SLOC) under Form Series BDC-GDSA, PDC, and are provided by prepaid dental companies, affiliated with SLOC, under Form Series BDC-GDSA, UDC-CA-GA06-UDC, UDC-CA-GA06-89, FB-NJ-0281, UDC-09-GDSA-TX, PDC in certain states except New York. Prepaid dental companies are Denticare of Alabama, Inc., United Dental Care of Arizona, Inc., UDC Dental California, Inc., United Dental Care of Colorado, Inc., Union Security DentalCare of Georgia, Inc., United Dental Care of Missouri, Inc., Union Security DentalCare of New Jersey, Inc., United Dental Care of New Mexico, Inc., UDC Ohio, Inc., United Dental Care of Texas, Inc., and United Dental Care of Utah, Inc. In New York, prepaid dental products are provided and administered by Sun Life and Health Insurance Company (U.S.) (SLHIC) (Lansing, MI) under Form Series BDC-GDSA-NY. Product offerings may not be available in all states and may vary depending on state laws and regulations.

This coverage does not constitute comprehensive health insurance (often referred to as “major medical coverage”) and does not satisfy the requirement for Minimum Essential Coverage under the Affordable Care Act.

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