

Welcome to

Workplace benefits

Everyone deserves a Guardian

Every day, Guardian gives 26 million Americans the security they deserve through our insurance and wealth management products and services.

We've partnered with your organization to offer you a range of employee benefits. Inside this pack, you'll find the plans your employer thinks you might benefit from.

Know your benefits

Your benefits support your physical and financial wellbeing, to help keep you and your loved ones protected.

With Guardian, you're in good hands. We've been delivering on our promises for over 150 years, and we're looking forward to doing the same for you too.

- Read through this information.
- Find out more about your benefits.
- Talk to your employer if you need help or have any questions.

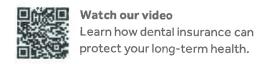
Your coverage options

	Dental insurance	Taking care of teeth and overall health
\bigcirc	Life insurance	Protecting your family's financial future
2	Short term disability insurance	Coverage if you're temporarily unable to work

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This document is a summary of the major features of the insurance coverage that's been agreed to with your employer – it isn't your contract.





Dental insurance

Taking care of your teeth is about more than just covering cavities and cleanings. It also means accounting for more expensive dental work, and your overall health.

With dental insurance, routine preventive care can lead to better overall health. And you'll be able to save money if any extensive dental work is required.

Who is it for?

Everyone should have access to great dental coverage, which is why we offer comprehensive plans that are available through employers as part of your benefit offerings.

What does it cover?

Dental insurance helps to protect your overall oral care. That includes services like preventive cleanings, x-rays, restorative services like fillings, and other more serious forms of oral surgery if you ever need them.

Why should I consider it?

Poor oral health isn't just aesthetic, it's also been linked to conditions including diabetes, heart disease, and strokes. So, while brushing and flossing every day can help keep your teeth clean, nothing should replace regular visits to the dentist.



Staying healthy

Joe visits his dentist for a routine dental cleaning, to take care of his teeth as well as his overall health.

Oral health is about more than just teeth and gums. It's also essential for a range of other health and wellbeing reasons:

Cardiovascular disease: Some research suggests that heart disease, clogged arteries, and infections may be linked to inflammation and infections from oral bacteria.

Osteoporosis: Weak and brittle bones may be linked to tooth loss.

Diabetes: Research shows that people with gum disease find it more difficult to control their blood sugar levels.

Alzheimer's disease: Tooth loss before the age of 35 may be a risk factor for Alzheimer's disease.

All information contained here is from the Mayo Clinic, Oral Health; A Window to Your Overall Health, www.mayoclinic.com. 2018.

You will receive these benefits if you meet the conditions listed in the policy.

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Your dental coverage

Option 1: PPO plan, you can visit any dentist; but you pay less out-of-pocket when you choose a PPO dentist. Out-of-network benefits are limited to our PPO fee schedule.

Option 2: PPO plan, you can visit any dentist; but you pay less out-of-pocket when you choose a PPO dentist. Out-of-network benefits are based on a percentile of the prevailing fee data for the dentist's zip code.

Your Dental Plan

Option I: PPO

Option 2: PPO

Your Network is	DentalGuard Pre	ferred	DentalGuard Pre	DentalGuard Preferred		
Your Bi-weekly premium	\$10.82		\$16.86			
You and Spouse/Domestic Partner	\$21.94		\$34.16			
You and Child(ren)	\$24.31		\$37.86			
You, Spouse/Domestic Partner and Child(ren)	\$32.97		\$51.33			
Calendar year deductible	In-Network	Out-of-Network	In-Network	Out-of-Network		
Individual	\$50	\$100	\$50	\$50		
Family limit	3 pe	er family	3 1	per family		
Waived for	Preventive	Preventive	Preventive	Preventive		
Charges covered for you (co-insurance)	In-Network	Out-of-Network	In-Network	Out-of-Network		
Preventive Care	100%	100%	100%	100%		
Basic Care	80%	50%	90%	80%		
Major Care	50%	25%	60%	50%		
Orthodontia	Not Covered	(applies to all levels)	Not Covered (applies to all levels)			
Annual Maximum Benefit	\$1000	\$1000	\$1500	\$1000		
				etwork and Out-of-Networ 000 with an additional \$500 twork		
Maximum Rollover	Υe	es	Yes			
Rollover Threshold	\$5	00	\$500			
Rollover Amount	\$2	50	\$250			
Rollover In-network Amount	\$3.	50	\$350			
Rollover Account Limit	\$10	000	\$10	000		
Lifetime Orthodontia Maximum	Not App	olicable	Not Applicable			
Dependent Age Limits	26 *		26*			

^{*}Family coverage for spouse and children if the child is dependent upon the employee for support and is: (i) living in the employee's household; or (ii) a full-time or part-time student.

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Your dental coverage

A Sample of Services Covered by Your Plan:

		Option I: PP	0	Option 2: P	PO
		Plan pays (on av	rerage)	Plan pays (on	average)
		In-network	Out-of-network	In-network	Out-of-network
Preventive Care	Cleaning (prophylaxis)	100%	100%	100%	100%
	Frequency:	Once Eve	ery 6 Months	Once	Every 6 Months
	Fluoride Treatments	100%	100%	100%	100%
	Limits:	No A	Age Limits		No Age Limits
	Oral Exams	100%	100%	100%	100%
	Periodontal Maintenance	100%	100%	100%	100%
	Frequency:	Once Eve	ery 6 Months	Once Every 6 Months	
	Sealants (per tooth)	100%	100%	100%	100%
	X-rays	100%	100%	100%	100%
Basic Care	Anesthesia*	80%	50%	90%	80%
	Fillings‡	80%	50%	90%	80%
	Perio Surgery	80%	50%	90%	80%
	Repair & Maintenance of Crowns, Bridges & Dentures	80%	50%	90%	80%
	Root Canal	80%	50%	90%	80%
	Scaling & Root Planing (per quadrant)	80%	50%	90%	80%
	Simple Extractions	80%	50%	90%	80%
	Surgical Extractions	80%	50%	90%	80%
Major Care	Bridges and Dentures	50%	25%	60%	50%
	Inlays, Onlays, Veneers**	50%	25%	60%	50%
	Single Crowns	50%	25%	60%	50%

This is only a partial list of dental services. Your certificate of benefits will show exactly what is covered and excluded. **For PPO and or Indemnity members, Crowns, Inlays, Onlays and Labial Veneers are covered only when needed because of decay or injury or other pathology when the tooth cannot be restored with amalgam or composite filing material. When Orthodontia coverage is for "Child(ren)" only, the orthodontic appliance must be placed prior to the age limit set by your plan; If full-time status is required by your plan in order to remain insured after a certain age; then orthodontic maintenance may continue as long as full-time student status is maintained. If Orthodontia coverage is for "Adults and Child(ren)" this limitation does not apply. *General Anesthesia – restrictions apply. ‡For PPO and or Indemnity members, Fillings – restrictions may apply to composite fillings.

Manage Your Benefits:

Go to www.Guardianlife.com to access secure information about your Guardian benefits including access to an image of your ID Card. Your on-line account will be set up within 30 days after your plan effective date..

Find A Dentist:

Visit www.Guardianlife.com
Click on "Find A Provider"; You will need to know your plan, which can be found on the first page of your dental benefit summary.

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Your dental coverage

EXCLUSIONS AND LIMITATIONS

- Important Information about Guardian's DentalGuard Indemnity and DentalGuard Preferred Network PPO plans: This policy provides dental insurance only. Coverage is limited to those charges that are necessary to prevent, diagnose or treat dental disease, defect, or injury. Deductibles apply. The plan does not pay for: oral hygiene services (except as covered under preventive services), orthodontia (unless expressly provided for), cosmetic or experimental treatments (unless they are expressly provided for), any treatments to the extent benefits are payable by any other payor or for which no charge is made, prosthetic devices unless certain conditions are met, and services ancillary to surgical treatment. The plan limits benefits for diagnostic
- consultations and for preventive, restorative, endodontic, periodontic, and prosthodontic services. The services, exclusions and limitations listed above do not constitute a contract and are a summary only. The Guardian plan documents are the final arbiter of coverage. Contract # GP-1-DG2000 et al.
- PPO and or Indemnity Special Limitation: Teeth lost or missing before a covered person becomes insured by this plan. A covered person may have one or more congenitally missing teeth or have lost one or more teeth before he became insured by this plan. We won't pay for a prosthetic device which replaces such teeth unless the device also replaces one or more natural teeth lost or extracted after the covered person became insured by this plan. R3-DG2000

DentalGuard Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage. This policy provides DENTAL insurance only. Policy Form # GP-1-DG2000, et al, GP-1-DEN-16



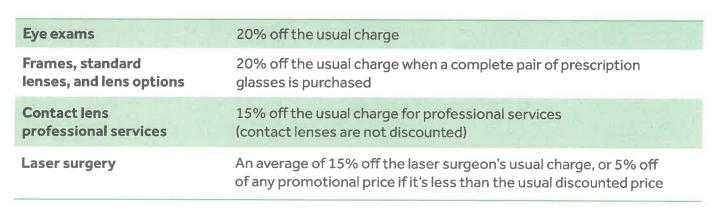
Your Guardian Vision Access **Program**

If you're eligible, you can receive discounts on vision care services or supplies from vision providers within the Vision Service Plan (VSP) Preferred Provider Organization (PPO) network.

You must pay the entire discounted fee directly to your VSP Network doctor. Discounts are not available from providers outside the VSP network.



Average discounts:







It's easy to save

Find a participating doctor near you by visiting guardiananytime.com/ fpapp/FPWeb/vision or calling 1 800 877 7195.

You don't need to bring your ID card, but you do need to let your doctor know that you have the Guardian VSP Access Plan at the time of service to receive your discount.

This is not insurance. If you qualify, you must pay the entire discounted fee directly to the VSP network doctor. There is no charge for the Discount Vision Access program. You must be enrolled in a Guardian dental plan in order to be eligible for the Discount Vision Access program. When you are no longer enrolled for dental coverage, your access to the network discounts ends.

The Guardian Life Insurance Company of America New York, NY 10004-4025, guardiananytime.com. Guardian's Vision Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. This policy provides vision care limited benefits health insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services. Plan documents are the final arbiter of coverage. Policy Form No. No. GP-1-VSN-96-1 et al.



Oral Health Rewards **Program**

Regular visits to the dentist can help prevent and detect the early signs of serious diseases.

That's why Guardian's Maximum Rollover Oral Health Rewards Program encourages and rewards members who visit the dentist, by rolling over part of your unused annual maximum into a Maximum Rollover Account (MRA). This can be used in future years if your plan's annual maximum is reached.

Automatic rollover

Submit a claim (without exceeding the paid claims threshold of a benefit year), and Guardian will roll over a portion of your unused annual dental maximum.

How maximum rollover works'

Depending on a plan's annual maximum, if claims made for a certain year don't reach a specified threshold, then the set maximum rollover amount can be rolled over.

Plan annual maximum**	Threshold	Maximum rollover amount	In-network only rollover amount	Maximum rollover account limit	
\$1,000	\$500	\$250	\$350	\$1,000	
Maximum claims reimbursement	Claims amount that Additional dollars determines rollover added to a plan's eligibility annual maximum for future years		Additional dollars added if only in-network providers were used during the benefit year	The limit that cannot	

Guardian's Dental Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage. Information provided in this communication is for informational purposes only. Dental Policy Form No. GP-1-DEN-16. GUARDIAN® is a registered service mark of The Guardian Life Insurance Company of America ® © Copyright 2019 The Guardian Life Insurance Company of America.

^{*} This example has been created for illustrative purposes only.

^{**} If a plan has a different annual maximum for PPO benefits vs. non-PPO benefits, (\$1500 PPO/\$1000 non-PPO for example) the non-PPO maximum determines the Maximum Rollover plan. May not be available in all states.



Guardian Choice

With dental insurance from Guardian, you have the flexibility to choose a plan that works for you, and helps you save.

Both of the dental plans available are designed to keep you healthy, with identical premiums. The differences between them are summarized below, and you can change plans each year at your annual enrollment time.



It's easy to save

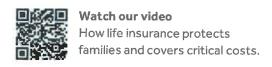
Find a participating doctor near you by visiting guardiananytime.com/fpapp/FPWeb/search or by downloading the Guardian Anytime mobile app.

Pick the plan that best suits your needs

Choose from:

	Value Plan	Network Access Plan				
Description	In-network and out-of-network benefits are paid at Both plans allow you to retain the freedom of choic					
Coinsurance	Preventive services covered at 100%. Coinsurance for other services is higher than the Network Access Plan (increased coverage).	Preventive services covered at 100%. Coinsurance for other services is lower than the Value Plan (decreased coverage).				
In-network	Member benefits are based on discounted (negotiated) rates.					
Out-of- network	Member pays the difference over network negotiated rates.	Member costs are based on usual and customary (UCR) rates.				

Guardian's Dental Insurance is underwritten and issued by The Guardian Life Insurance Company of America or its subsidiaries, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage." Policy Form #GP-1-DG2000, et al.



Life insurance

If something happens to you, life insurance can help your family reduce financial stress.

Life insurance helps protect your family's finances by providing a cash benefit if you pass away. This ensures that they'll be financially supported, and can cover important things from bills to funeral costs. With life policies, you can get affordable life insurance protection for a set period of time.

Who is it for?

Everyone's life insurance needs are different, depending on their family situation. That's why group life insurance through an employer is an easier and more affordable option than individual life insurance.

What does it cover?

Life insurance protects your loved ones by providing a benefit (which is usually tax-exempt) if you pass away.

Why should I consider it?

Life insurance is about more than just covering expenses. Depending on your circumstances, it could take your family years to recover from the loss of your income.

With a life insurance benefit, your family will have extra money to cover mortgage and rent payments, legal or medical fees, childcare, tuition, and any outstanding debts.

Guardian, its subsidiaries, agents, and employees do not provide tax, legal, or accounting advice. Consult your tax, legal, or accounting professional regarding your individual situation.

You will receive these benefits if you meet the conditions listed in the policy.



Preparing and planning

Jorge's never considered purchasing life insurance, but after being offered it through work, he decides it's a smart way to protect his family.

Jorge has a mortgage, and because his wife is helping to take care of her mother, she only works part-time. In addition, his daughter is about to start college.

Jorge looks at how his family would be affected by losing him.

Average funeral cost: \$9,000

Average mortgage debt: \$202,000

Average cost of college: \$17,000 -\$44,000

Average household credit card debt:

With life insurance, Jorge can

make sure that part of these costs are covered if something happens to him.

This example is for illustrative purposes only. Your plan's coverage may vary. See your plan's information on the following pages for specific amounts and details.





Your life coverage

	BASIC LIFE	VOLUNTARY TERM LIFE		
Employee Benefit	Your employer provides Basic Life Coverage for all full time employees in the amount of 100% of your annual salary, to a maximum of \$150,000 with a minimum amount of \$10,000.	\$10,000 increments to a maximum of \$300,000. See Cost Illustration page for details.		
Accidental Death and Dismemberment	Your Basic Life coverage includes Accidental Death and Dismemberment coverage.	Not available		
Spouse/Domestic Partner Benefit	N/A	Up to 50% of employee coverage to a max of \$150,000‡		
Child Benefit	N/A	Your dependent children age 14 days to 23 years (25 if full time student). Up to 10% of employee coverage to a max of \$10,000. Subject to state limits.		

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Your life coverage

	BASIC LIFE	VOLUNTARY TERM LIFE	
Guarantee Issue: The 'guarantee' means you are not required to answer health questions to qualify for coverage up to and including the specified amount, when you sign up for coverage during the initial enrollment period.	Underwriting may be required, depending on amount and/or age	We Guarantee Issue coverage up to: Employee Less than age 65 \$100,000, 65-69 \$10,000, \$0. Spouse Less than age 65 \$25,000, 65-69 \$5,000, \$0. Dependent children \$10,000. An Additional \$100,000 per employee, \$25,000 for a spouse can be obtained with a "No" response to the Health question (on your enrollment form). Evidence of Insurability is required if the elected amount exceeds the Guarantee Issue plus Additional amount. The Additional amount is available for ages Less than age 65	
Premiums	Covered by your company if you meet eligibility requirements	Increase on plan anniversary after you enter next five-year age group	
Portability: Allows you to take coverage with you if you terminate employment.	Yes, with age and other restrictions, including evidence of insurability	Yes, with age and other restrictions	
Conversion: Allows you to continue your coverage after your group plan has terminated.	Yes, with restrictions; see certificate of benefits	Yes, with restrictions; see certificate of benefits	
Accelerated Life Benefit: A lump sum benefit is paid to you if you are diagnosed with a terminal condition, as defined by the plan.	Yes	Yes	
Waiver of Premiums: Premium will not need to be paid if you are totally disabled.	For employees disabled prior to age 60, with premiums waived until age 65, if conditions are met	For employees disabled prior to age 60, with premiums waived until age 65, if conditions met	
LifeAssist SM : Provides supplemental income that is calculated based off a percentage of your Life benefit to a specified dollar amount if you are ADL disabled. Benefits are paid to the lesser of 100 months or to when waiver of premium ends.	Yes	No	
Benefit Reductions: Benefits are reduced by a certain percentage as an employee ages.	35% at age 65, 60% at age 70, 75% at age 75, 85% at age 80	35% at age 65, 60% at age 70, 75% at age 75, 85% at age 80	

Subject to coverage limits

[‡] Spouse/DP coverage terminates at age 70.

Voluntary Life Cost Illustration:

To determine the most appropriate level of coverage, as a rule of thumb, you should consider about 6 - 10 times your annual income, factoring in projected costs to help maintain your family's current life style.

Bi-weekly premiums displayed.

Policy Election Amount		Policy Election Cost Per Age Bracket							
Employee	< 30	30–34	35–39	40-44	45-49	50-54	55-59	60–64	65–69 [†]
\$20,000	\$.65	\$.74	\$1.20	\$2.22	\$3.42	\$5.26	\$8.12	\$13.57	\$22.62
\$30,000	\$.97	\$1.11	\$1.80	\$3.32	\$5.12	\$7.89	\$12.19	\$20.35	\$33.92
\$40,000	\$1.29	\$1.48	\$2.40	\$4.43	\$6.83	\$10.52	\$16.25	\$27.14	\$45.23
\$50,000	\$1.62	\$1.85	\$3.00	\$5.54	\$8.54	\$13.15	\$20.31	\$33.92	\$56.54
\$60,000	\$1.94	\$2.22	\$3.60	\$6.65	\$10.25	\$15.79	\$24.37	\$40.71	\$67.85
\$70,000	\$2.26	\$2.59	\$4.20	\$7.75	\$11.95	\$18.42	\$28.43	\$47.49	\$79.15
\$80,000	\$2.59	\$2.95	\$4.80	\$8.86	\$13.66	\$21.05	\$32.49	\$54.28	\$90.46
\$90,000	\$2.91	\$3.32	\$5.40	\$9.97	\$15.37	\$23.68	\$36.55	\$61.06	\$101.77
\$100,000	\$3.23	\$3.69	\$6.00	\$11.08	\$17.08	\$26.31	\$40.62	\$67.85	\$113.08
\$110,000	\$3.55	\$4.06	\$6.60	\$12.19	\$18.79	\$28.94	\$44.68	\$74.63	\$124.39
\$120,000	\$3.88	\$4.43	\$7.20	\$13.29	\$20.49	\$31.57	\$48.74	\$81.42	\$135.69
\$130,000	\$4.20	\$4.80	\$7.80	\$14.40	\$22.20	\$34.20	\$52.80	\$88.20	\$147.00
\$140,000	\$4.52	\$5.17	\$8.40	\$15.51	\$23.91	\$36.83	\$56.86	\$94.99	\$158.31
\$150,000	\$4.85	\$5.54	\$9.00	\$16.62	\$25.62	\$39.46	\$60.92	\$101.77	\$169.62
\$160,000	\$5.17	\$5.91	\$9.60	\$17.72	\$27.32	\$42.09	\$64.99	\$108.55	\$180.92
\$170,000	\$5.49	\$6.28	\$10.20	\$18.83	\$29.03	\$44.72	\$69.05	\$115.34	\$192.23
\$180,000	\$5.82	\$6.65	\$10.80	\$19.94	\$30.74	\$47.35	\$73.11	\$122.12	\$203.54
\$190,000	\$6.14	\$7.02	\$11.40	\$21.05	\$32.45	\$49.99	\$77.17	\$128.91	\$214.85
\$200,000	\$6.46	\$7.39	\$12.00	\$22.15	\$34.15	\$52.62	\$81.23	\$135.69	\$226.15
\$210,000	\$6.79	\$7.75	\$12.60	\$23.26	\$35.86	\$55.25	\$85.29	\$142.48	\$237.46
\$220,000	\$7.11	\$8.12	\$13.20	\$24.37	\$37.57	\$57.88	\$89.35	\$149.26	\$248.77
\$230,000	\$7.43	\$8.49	\$13.80	\$25.48	\$39.28	\$60.51	\$93.42	\$156.05	\$260.08
\$240,000	\$7.75	\$8.86	\$14.40	\$26.59	\$40.99	\$63.14	\$97.48	\$162.83	\$271.39
\$250,000	\$8.08	\$9.23	\$15.00	\$27.69	\$42.69	\$65.77	\$101.54	\$169.62	\$282.69
\$260,000	\$8.40	\$9.60	\$15.60	\$28.80	\$44.40	\$68.40	\$105.60	\$176.40	\$294.00
\$270,000	\$8.72	\$9.97	\$16.20	\$29.91	\$46.11	\$71.03	\$109.66	\$183,19	\$305.31
\$280,000	\$9.05	\$10.34	\$16.80	\$31.02	\$47.82	\$73.66	\$113.72	\$189.97	\$316.62
\$290,000	\$9.37	\$10.71	\$17.40	\$32.12	\$49.52	\$76.29	\$117.79	\$196.75	\$327.92
\$300,000	\$9.69	\$11.08	\$18.00	\$33.23	\$51.23	\$78.92	\$121.85	\$203.54	\$339.23

V	oluntary	Life	Cost	Illustration	continued
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	< 30	30–34	35-39	40-44	45-49	50-54	55-59	60–64	65-69 [†]
	n Amount Up to	50% of Er	nployee A	mount to	a maximu	m \$150,00	0		
Spouse/DP									
\$10,000	\$.32	\$.37	\$.60	\$1.11	\$1.71	\$2.63	\$4.06	\$6.79	\$11.31
\$15,000	\$.49	\$.55	\$.90	\$1.66	\$2.56	\$3.95	\$6.09	\$10.18	\$16.96
\$20,000	\$.65	\$.74	\$1.20	\$2.22	\$3.42	\$5.26	\$8.12	\$13.57	\$22.62
\$25,000	\$.81	\$.92	\$1.50	\$2.77	\$4.27	\$6.58	\$10.15	\$16.96	\$28.27
\$30,000	\$.97	\$1.11	\$1.80	\$3.32	\$5.12	\$7.89	\$12.19	\$20.35	\$33.92
\$35,000	\$1.13	\$1.29	\$2.10	\$3.88	\$5.98	\$9.21	\$14.22	\$23.75	\$39,58
\$40,000	\$1.29	\$1.48	\$2.40	\$4.43	\$6.83	\$10.52	\$16.25	\$27.14	\$45.23
\$45,000	\$1.45	\$1.66	\$2.70	\$4.99	\$7.69	\$11.84	\$18.28	\$30.53	\$50.89
\$50,000	\$1.62	\$1.85	\$3.00	\$5.54	\$8.54	\$13.15	\$20.31	\$33.92	\$56.54
\$55,000	\$1.78	\$2.03	\$3.30	\$6.09	\$9.39	\$14.47	\$22.34	\$37.32	\$62.19
\$60,000	\$1.94	\$2.22	\$3.60	\$6.65	\$10.25	\$15.79	\$24.37	\$40.71	\$67.85
\$65,000	\$2.10	\$2.40	\$3.90	\$7.20	\$11.10	\$17.10	\$26.40	\$44.10	\$73.50
\$70,000	\$2.26	\$2.59	\$4.20	\$7.75	\$11.95	\$18.42	\$28.43	\$47.49	\$79.15
\$75,000	\$2.42	\$2.77	\$4.50	\$8.31	\$12.81	\$19.73	\$30.46	\$50.89	\$84.81
\$80,000	\$2.59	\$2.95	\$4.80	\$8.86	\$13.66	\$21.05	\$32.49	\$54.28	\$90.46
\$85,000	\$2.75	\$3.14	\$5.10	\$9.42	\$14.52	\$22.36	\$34.52	\$57.67	\$96.12
\$90,000	\$2.91	\$3.32	\$5.40	\$9.97	\$15.37	\$23.68	\$36.55	\$61.06	\$101.77
\$95,000	\$3.07	\$3.51	\$5.70	\$10.52	\$16.22	\$24.99	\$38.59	\$64.45	\$107.42
\$100,000	\$3.23	\$3.69	\$6.00	\$11.08	\$17.08	\$26.31	\$40.62	\$67.85	\$113.08
\$105,000	\$3.39	\$3.88	\$6.30	\$11.63	\$17.93	\$27.62	\$42.65	\$71.24	\$118.73
\$110,000	\$3.55	\$4.06	\$6.60	\$12.19	\$18.79	\$28.94	\$44.68	\$74.63	\$124.39
\$115,000	\$3.72	\$4.25	\$6.90	\$12.74	\$19.64	\$30.25	\$46.71	\$78.02	\$130.04
\$120,000	\$3.88	\$4.43	\$7.20	\$13.29	\$20.49	\$31.57	\$48.74	\$81.42	\$135.69
\$125,000	\$4.04	\$4.62	\$7.50	\$13.85	\$21.35	\$32.89	\$50.77	\$84.81	\$141.35
\$130,000	\$4.20	\$4.80	\$7.80	\$14.40	\$22.20	\$34.20	\$52.80	\$88.20	\$147.00
\$135,000	\$4.36	\$4.99	\$8.10	\$14.95	\$23.05	\$35.52	\$54.83	\$91.59	\$152.65
\$140,000	\$4.52	\$5.17	\$8.40	\$15.51	\$23.91	\$36.83	\$56.86	\$94.99	\$158.31
\$145,000	\$4.69	\$5.35	\$8.70	\$16.06	\$24.76	\$38.15	\$58.89	\$98.38	\$163.96
\$150,000	\$4.85	\$5.54	\$9.00	\$16.62	\$25.62	\$39.46	\$60.92	\$101.77	\$169.62
								4 - 5 - 17 5	

Voluntary Life Cost Illu	stration continue	d							
	< 30	30-34	35–39	40-44	45-49	50-54	55-59	60-64	65–69 [†]
Policy Election	Amount Up to	10 % of E	mployee A	mount to	a maximu	m of \$10,0	00		
Child(ren)									
\$2,000	\$0.16	\$0.16	\$0.16	\$0.16	\$0.16	\$0.16	\$0.16	\$0.16	\$0.16
\$3,000	\$0.24	\$0.24	\$0.24	\$0.24	\$0.24	\$0.24	\$0.24	\$0.24	\$0.24
\$4,000	\$0.31	\$0.31	\$0.31	\$0.31	\$0.31	\$0.31	\$0.31	\$0.31	\$0.31
\$5,000	\$0.39	\$0.39	\$0.39	\$0.39	\$0.39	\$0.39	\$0.39	\$0.39	\$0.39
\$6,000	\$0.47	\$0.47	\$0.47	\$0.47	\$0.47	\$0.47	\$0.47	\$0.47	\$0.47
\$7,000	\$0.55	\$0.55	\$0.55	\$0.55	\$0.55	\$0.55	\$0.55	\$0.55	\$0.55
\$8,000	\$0.63	\$0.63	\$0.63	\$0.63	\$0.63	\$0.63	\$0.63	\$0.63	\$0.63
\$9,000	\$0.71	\$0.71	\$0.71	\$0.71	\$0.71	\$0.71	\$0.71	\$0.71	\$0.71

\$0.79

\$0.79

Refer to Guarantee Issue row on page above for Voluntary Life GI+AA amounts.

\$0.79

\$0.79

Premiums for Voluntary Life Increase in five-year increments

Spouse/DP coverage premium is based on Employee age.

†Benefit reductions apply.

\$10,000

LIMITATIONS AND EXCLUSIONS:

A SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS FOR LIFE AND AD&D COVERAGE:

You must be working full-time on the effective date of your coverage; otherwise, your coverage becomes effective after you have completed a specific waiting period. Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment (a) exceeding one year; or (b) in an area under travel warning by the US Department of State. Subject to state specific variations. Evidence of Insurability is required on all late enrollees. This coverage will not be effective until approved by a Guardian underwriter. This proposal is hedged subject to satisfactory financial evaluation. Please refer to certificate of coverage for

Dependent life insurance will not take effect if a dependent, other than a newborn, is confined to the hospital or other health care facility or is unable to perform the normal activities of someone of like age and sex.

A person is ADL-disabled if he or she is (a) physically unable to perform two or more ADLs without continuous physical assistance; or (b) cognitively impaired, and requires verbal cueing to protect himself/herself or others. ADLs are bathing, dressing, toileting, transferring, continence, and eating.

Accelerated Life Benefit is not paid to an employee under the following circumstances: one who is required by law to use the benefit to pay creditors; is required by court order to pay the benefit to another person; is required by a government agency to use the payment to receive a government benefit; or loses his or her group coverage before an accelerated benefit is paid.

\$0.79

\$0.79

\$0.79

Voluntary Life Only:

\$0.79

\$0.79

We pay no benefits if the insured's death is due to suicide within two years from the insured's original effective date. This two year limitation also applies to any increase in benefit. This exclusion may vary according to state law. Late entrants and benefit increases require underwriting approval.

GP-1-R-LB-90, GP-1-R-EOPT-96

Guarantee Issue/Conditional Issue amounts may vary based on age and case size. See your Plan Administrator for details. Late entrants and benefit increases require underwriting

For AD&D: We pay no benefits for any loss caused: by willful self-injury; sickness, disease or medical treatment; by participating in a civil disorder or committing a felony; Traveling on any type of aircraft while having duties on that aircraft; by declared or undeclared act of war or armed aggression; while a member of any armed force (May vary by state); while driving a motor vehicle without a current, valid driver's license; by legal intoxication; or by voluntarily using a non-prescription controlled substance. Contract #GP-1-R-ADCL1-00 et al. We won't pay more than 100% of the Insurance amount for all losses due to the same accident, except as stated. The loss must occur within a specified period of time of the accident. Please see contract for specific definition; definition of loss may vary depending on the benefit payable.

Guardian Group Life Insurance underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs, Plan documents are the final arbiter of coverage.

Policy Form # GP-1-LIFE-15



WillPrep

Protect the ones you love with a range of dedicated services designed to help you provide for your family.

WillPrep Services includes a range of different resources that make it easier for you to prepare a will.

These range from a library of online planning documents to accessing experienced professionals that can help you with the more complicated details.

How it can help



Access simple documents including wills and power of attorney letters



Speak with consultants to discuss estate planning



Prepare your will with the assistance or support of an attorney



How to access

To access WillPrep Services. you'll need a few personal details.

Visit

ibhwillprep.com



User ID

WillPrep



Password GLIC09

For more information or support, you can reach out by phoning 1877 433 6789.

This service is only available if you purchase qualifying lines of coverage. See your plan administrator for more details.

WillPrep Services are provided by Integrated Behavioral Health, Inc., and its contractors. The Guardian Life Insurance Company of America (Guardian) does not provide any part of Will Prep Services. Guardian is not responsible or liable for care or advice given by any provider or resource under the program. This information is for illustrative purposes only. It is not a contract. Only the Administration Agreement can provide the actual terms, services, limitations and exclusions. Guardian and IBH reserve the right to discontinue the WillPrep Services at any time without notice. Legal services will not be provided in connection with or preparation for any action against Guardian, IBH, or your employer.



Short term disability insurance

Disability insurance covers a part of your income, so you can pay your bills if you're injured or sick and can't work.

Disability may be more common than you might realize, and people can be unable to work for all sorts of different reasons. There are times when many disabilities can be caused by Illness, including common conditions like heart disease and arthritis. However, many disabilities aren't covered by workers' compensation.

Who is it for?

If you rely on your income to pay for everyday expenses, then you should probably consider disability insurance. It helps ensure that you'll receive a partial income if you're injured or too sick to work.

What does it cover?

Many disability insurance plans pay out a portion or percentage of your income if you're diagnosed with a serious illness or experience an injury that prevents you from doing your job.

Why should I consider it?

Accidents happen, and you can't always anticipate if or when you'll become sick or injured. That's why it's important to have a disability policy that helps you pay your bills in the event of being unable to collect your normal paycheck.

You will receive these benefits if you meet the conditions listed in the policy.



Partial income replacement

Mike injures his back in a bicycle accident and can't work for 13 weeks.

Unpaid time off work: 13 weeks

Elimination period: 1 week

After a 1-week elimination period following his accident, Mike's Guardian Short Term Disability policy kicks in and replaces \$400 of his weekly income for the remaining 12 weeks of his rehabilitation.

This gives him a total of \$4,800 to cover his expenses while he's unable to work.

This example is for illustrative purposes only. Your plan's coverage may vary. See your plan's information on the following pages for specific amounts and details.





Short-Term Disability

Your short term disability coverage

	Onor to refin bisability
Coverage amount	60% of salary to maximum \$1000/week
Maximum payment period: Maximum length of time you can receive disability benefits.	22 weeks
Accident benefits begin: The length of time you must be disabled before benefits begin.	Day 30
Illness benefits begin: The length of time you must be disabled before benefits begin.	Day 30
Evidence of Insurability: A health statement requiring you to answer a few medical history questions.	Health Statement may be required
Guarantee Issue: The 'guarantee' means you are not required to answer health questions to qualify for coverage up to and including the specified amount, when applicant signs up for coverage during the initial enrollment period.	We Guarantee Issue \$1000 in coverage
Minimum work hours/week: Minimum number of hours you must regularly work each week to be eligible for coverage.	Planholder Determines
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Not Applicable

UNDERSTANDING YOUR BENEFITS—DISABILITY (Some information may vary by state)

Earnings definition: Your covered salary excludes bonuses and commissions.

Pre-existing conditions: A pre-existing condition includes any condition/symptom for which you, in the specified time period prior

to coverage in this plan, consulted with a physician, received

treatment, or took prescribed drugs.





Your short term disability coverage

A SUMMARY OF DISABILITY PLAN LIMITATIONS AND EXCLUSIONS

- Evidence of Insurability is required on all late enrollees. This coverage will not be effective until approved by a Guardian underwriter. This proposal is hedged subject to satisfactory financial evaluation. Please refer to certificate of coverage for full plan description.
- You must be working full-time on the effective date of your coverage; otherwise, your coverage becomes effective after you have completed a specific waiting period.
- Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment: (a) exceeding one year; or (b) in an area under travel warning by the US Department of State. Subject to state specific
- We do not pay benefits for charges relating to a covered person: taking part in any war or act of war (including service in the armed forces) committing a felony or taking part in any riot or other civil disorder or intentionally injuring themselves or attempting suicide while sane or insane. We do not pay benefits for charges relating to legal intoxication, including but not limited to the operation of a motor vehicle, and for the voluntary
- use of any poison, chemical, prescription or non-prescription drug or controlled substance unless it has been prescribed by a doctor and is used as prescribed. We limit the duration of payments for long term disabilities caused by mental or emotional conditions, or alcohol or drug abuse. We do not pay benefits during any period in which a covered person is confined to a correctional facility, an employee is not under the care of a doctor, an employee is receiving treatment outside of the US or Canada, and the employee's loss of earnings is not solely due to disability.
- This policy provides disability income insurance only. It does not provide "basic hospital", "basic medical", or "medical" insurance as defined by the New York State Insurance Department.
- If this plan is transferred from another insurance carrier, the time an insured is covered under that plan will count toward satisfying Guardian's pre-existing condition limitation period. State variations may apply.
- When applicable, this coverage will integrate with NJ TDB, NY DBL, CA SDI, RI TDI, Hawaii TDI and Puerto Rico DBA, DC PFML and WA PFML Contract # GP-1-STD-15-1.0 et al.

Guardian's Group Short Term Disability insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. This policy provides disability income insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services. Plan documents are the final arbiter of coverage. Policy Form #GP-1-STD07-1.0, et al, GP-1-STD-15

S Guardian

BENEFITS OFFSET NOTICE

Your Guardian Group Disability Policy (Policy) may provide that any Guardian Disability benefits you receive may be offset by Other Income/ Benefits you or your dependents receive while you are receiving Guardian Disability Benefits. This means that Guardian may deduct the amount of any Other/Income Benefit payments made to you or your dependents from your weekly or monthly Guardian Disability Benefit prior to issuing payment. Examples of Other Income Benefits described in your Policy include:

- U.S. Social Security Disability Income or Retirement Benefits
- Disability or Retirement Benefits payable from any other source, including state mandated disability plans, U.S. Railroad Retirement plan or similar U.S./Canadian plan
- Salary earned or paid during your disability period, including sick leave, paid time off, severance payments, bonuses and commissions
- · Workers' Compensation benefits
- No-fault motor vehicle coverage benefits
- Distributions, profit sharing, royalties

Upon enrollment, please review your certificate booklet for the full definition of Other Income Benefits and provisions pertaining benefit offsets and overpayment recovery. If you or your dependents are awarded any Other Income Benefits, including lump sum payments while you are receiving Guardian Disability benefits, you should contact Guardian promptly to calculate the appropriate offset amount and prevent an overpayment of benefits.



Employee Assistance Program

We all need a little support every now and then.

Guardian's Employee Assistance Program gives you and your family members access to confidential personal support, across everything from stress management and nutrition to handling legal or fi nancial issues.

The services available include consultations with experienced professionals, as well as access to resources and discounts designed to help you in a variety of different ways.

How it can help



Consultative services are available to provide direct support and assistance



Work/life assistance that can help you save money and balance commitments



Access legal and financial assistance and resources-including WillPrep Services



How to access

To access the WorkLifeMatters Employee Assistance Program, you'll need a few personal details.

Visit

ibhworklife.com



User ID

Matters



Password wlm70101

For more information or support, you can reach out by phoning 1800 386 7055. The team is available 24 hours a day, 7 days a week1.

This service is only available if you purchase qualifying lines of coverage. See your plan administrator for more details.

 $Work Life Matters\ Program\ services\ are\ provided\ by\ Integrated\ Behavioral\ Health, Inc.,$ and its contractors. Guardian does not provide any part of WorkLifeMatters program services. Guardian is not responsible or liable for care or advice given by any provider or resource under the program. This information is for illustrative purposes only. It is not a contract. Only the Administration Agreement can provide the actual terms, services, limitations and exclusions. Guardian and IBH reserve the right to discontinue the WorkLifeMatters program at any time without notice. Legal services provided through WorkLife Matters will not be provided in connection with or preparation for any action against Guardian, IBH, or your employer. WorkLifeMatters Program is not an insurance benefit and may not be available in all states.

¹Office hours: Monday-Friday 6 a.m.-5 p.m. PST.





Our commitment to you

Please read the documentation referenced below carefully. The notices are intended to provide you important information about our insurance offerings and to protect your interests. Certain ones are required by law.

Important information



Notice Informing Individuals about Nondiscrimination and Accessibility Requirements

Guardian notice stating that it complies with applicable Federal civil rights laws and does not discriminate based on race, color, national origin, age, disability, sex, or actual or perceived gender identity. The notice provides contact information for filing a nondiscrimination grievance. It also provides contact information for access to free aids and services by disabled people to assist in communications with Guardian.

Visit https://www.guardiananytime.com/notice48 to read more.

No Cost Language Services

Guardian provides language assistance in multiple languages for members who have limited English proficiency. Visit https://www.guardiananytime.com/notice46 to read more.

Dental insurance



Guardian's HIPAA Notice of Privacy Practices

The notice describes how health information about you may be used and disclosed and how you can access this information. Visit https://www.guardiananytime.com/notice50 to read more.

Short term disability insurance



Disability Offset Notice

Offsets are provisions in your disability coverage that allow the insurer to deduct from your regular benefit other types of income you receive or are eligible to receive from other sources due to your disability.

Visit https://www.guardiananytime.com/notice51 to read more.