



Accident Benefit Summary

Group Number: 00421664

Accident insurance through Guardian provides you:

- · A cash benefit for covered injuries, treatments and services, in addition to whatever your medical plan may cover
- · Payments go directly to you, not the doctor
- Easy enrollment with no medical questions

About Your Benefits:

	ACCIDENT	
COVERAGE - DETAILS		
Your Bi-weekly premium	\$9.12	
You and Spouse	\$15.68	
You and Child(ren)	\$16.17	
You, Spouse and Child(ren)	\$22.73	
Accident Coverage Type	Off Job	
Portability - Allows you to take your Accident coverage with you if you terminate employment.	Included	
ACCIDENTAL DEATH AND DISMEMBERMENT		
	Employee \$25,000	
Benefit Amount(s)	Spouse \$12,500	
	Child \$5,000	
	Quadriplegia, Loss of speech & hearing (both ears),	
Catastrophic Loss	Loss of Cognitive function: 100% of AD&D	
	Hemiplegia & Paraplegia: 50% of AD&D	
Common Carrier	200% of AD&D benefit	
Common Disaster	200% of Spouse AD&D benefit	
Dismemberment - Hand, Foot, Sight	Single: 50% of AD&D benefit	
213111011120111101110 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Multiple: 100% of AD&D benefit	
Dismemberment - Thumb/Index Finger Same Hand, Four Fingers Same Hand, All Toes Same Foot	25% of AD&D benefit	
Seatbelts and Airbags	Seatbelts: \$10,000 & Airbags: \$15,000	
Reasonable Accommodation to Home or Vehicle	\$2,500	
WELLNESS BENEFIT - Per Year Limit	\$50	
Child(ren) Age Limits	Children age birth to 26 years	
FEATURES		
Accident Emergency Room Treatment	\$175	
Accident Follow-Up Visit - Doctor	\$50 up to 6 treatments	
Air Ambulance	\$1,000	
Ambulance	\$150	
Appliance - Wheelchair, leg or back brace, crutches, walker, walking boot that extends above the ankle or brace for the neck.	\$125	
Blood/Plasma/Platelets	\$300	
	9 sq inches to 18 sq inches: \$0/\$2,000	
Burns (2nd Degree/3rd Degree)	18 sq inches to 35 sq inches: \$1,000/\$4,000	
	Over 35 sq inches: \$3,000/\$12,000	
Burn - Skin Graft	50% of burn benefit	

Child Organized Sport - Benefit is paid if the covered accident occurred while your covered child is participating in an organized sport that is governed by an organization and requires formal registration to participate.	20% increase to child benefits	
Chiropractic Visits	\$25 per visit up to 6 visits	
Coma	\$10,000	
Concussions	\$75	
Dislocations	Schedule up to \$4,400	
Diagnostic Exam (Major)	\$150	
Emergency Dental Work	\$300/Crown, \$75/Extraction	
Epidural pain management	\$100, 2 times per accident	
Eye Injury	\$300	
Family Care	\$20/day up to 30 days	
Fracture	Schedule up to \$5,500	
Hospital Admission	\$1,000	
Hospital Confinement	\$225/day - up to 1 year	
Hospital ICU Admission	\$2,000	
Hospital ICU Confinement	\$450/day - up to 15 days	
nitial Physician's office/Urgent Care Facility Treatment	\$75	
oint Replacement (hip/knee/shoulder)	\$2,500/\$1,250/\$1,250	
Knee Cartilage	\$500	
Laceration	Schedule up to \$400	
Lodging - The hospital must be more than 50 miles from the insured's residence.	\$125/day, up to 30 days for companion hotel stay	
Occupational or Physical Therapy	\$25/day up to 10 days	
Prosthetic Device/Artificial Limb	1: \$500	

UNDERSTANDING YOUR BENEFITS:

Transportation - Benefit is paid if you have to travel more than 50 miles one way to

receive special treatment at a hospital or facility due to a covered accident.

Ruptured Disc With Surgical Repair

Surgery - Exploratory or Arthroscopic

Tendon/Ligament/Rotator Cuff

Surgery

X - Ray

• **Common Carrier** – Benefit is paid if an insured's death occurs due to an accident while riding as a fare-paying passenger in a public conveyance. If this is paid, we do not pay the Accidental Death benefit.

\$500

\$250

\$30

I: \$500

Schedule up to \$1,250

Hernia: \$150

2 or more: \$1,000

\$500, 3 times per accident

- **Common Disaster** Benefit is paid if both you & your spouse die in a covered accident or separate covered accidents within the same 24 hour period.
- Reasonable Accomodation Benefit is payable if a modification is required to an insured's place of residence or vehicle due to an Accidental Dismemberment or Catastrophic loss.
- Accident Emergency Room Treatment Benefit is paid only when an insured is examined or treated within 72 hours of a covered accident.

UNDERSTANDING YOUR BENEFITS (Cont.):

This document is a summary of the major features of the referenced insurance coverage. It is intended for illustrative purposes only and does not constitute a contract. The insurance plan documents, including the policy and certificate, comprise the contract for coverage. The full plan description, including the benefits and all terms, limitations and exclusions that apply will be contained in your insurance certificate. The plan documents are the final arbiter of coverage. Coverage terms may vary by state and actual sold plan. The premium amounts reflected in this summary are an approximation; if there is a discrepancy between this amount and the premium actually billed, the latter prevails.

Manage Your Benefits:

Go to www.GuardianAnytime.com to access secure information about your Guardian benefits. Your on-line account will be set up within 30 days after your plan effective date.

Need Assistance?

Call the Guardian Helpline (888) 600-1600, weekdays, 8:00 AM to 8:30 PM, EST. Refer to your member ID (social security number) and your plan number: 00421664

LIMITATIONS AND EXCLUSIONS:

A SUMMARY OF ACCIDENT LIMITATIONS AND EXCLUSIONS:

Employees must be working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment: (a) exceeding I year; or (b) in an area under travel warning by the US Department of State, subject to state specific variations.

This proposal summarizes the major features of the Guardian Accident benefit plan. It is not intended to be a complete representation of the proposed plan. For full plan features, including exclusions and limitations, please refer to your Policy.

This proposal is hedged subject to satisfactory financial evaluation.

We don't pay benefits for any Injury caused by or related to directly or indirectly: Sickness, disease, mental infirmity or medical or surgical treatment; the covered person being legally intoxicated; declared or undeclared war, act of war, or armed aggression; service in the armed forces, National Guard, or military reserves of any state or country; taking part in a riot or civil disorder; commission of, or attempt to commit a felony; treatment rendered or hospital confinement outside the United States or Canada; intentionally self-inflicted Injury, while sane or insane; suicide or attempted suicide, while sane or insane; travel or flight in any

kind of aircraft, including any aircraft owned by or for the policyholder, except as a fare-paying passenger on a common carrier; participation in any kind of sporting activity for compensation or profit, including coaching or officiating; riding in or driving any motor-driven vehicle in a race, stunt show or speed test; participation in hang gliding, bungee jumping, sail gliding, parasailing, parakiting, ballooning, parachuting, or skydiving; an accident that occurred before the covered person is covered by this plan; injuries to a dependent child received during birth; voluntary use of any poison, chemical, prescription or non-prescription drug or controlled substance unless: (1) it was prescribed for a covered person by a doctor, and (2) it was used as prescribed. In the case of a non-prescription drug, this Plan does not pay for any Accident resulting from or contributed to by use in a manner inconsistent with package instructions. "Controlled substance" means anything called a controlled substance in Title II of the Comprehensive Drug Abuse Prevention and Control Act of 1970, as amended from time to time. Job related or on the job injuries for the employee are excluded if Accident coverage is off job only.

Contract # GP-I-AC-IC-12

If Accident insurance premium is paid for on a pre tax basis, the benefit may be taxable. Please contact your tax or legal advisor regarding the tax treatment of your policy benefits.

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Easy-To-Use Online Link Provides Faster Processing

Guardian's online electronic Evidence of Insurability (EOI) provides an alternative to paper EOI forms when you need to provide additional information for requested coverage.

Common situations include:

- Answering yes to one of the health questions on your enrollment form
- Enrolling for coverage in excess of the guaranteed issue amount
- Requesting coverage after your initial eligibility for coverage

Electronic Evidence of Insurability can be used for the following coverages*:

- · Basic Life
- Voluntary Life
- · Short Term Disability
- · Long Term Disability

Guardian's online EOI form offers several advantages:

- Your personal data is kept secure
- No errors due to hand-written data
- · Faster submission of your completed form

Accessing the electronic Evidence of Insurability link

Simply go to: guardiananytime.com/eoi

No registration is required. The process is easy and secure, simply follow the steps outlined below:

- 1 Fill in your Group ID #
- 2 Enter your personal information
- 3 Answer the health questions
- 4 Electronically sign your name and click 'Submit'

Guardian receives the completed EOI form in minutes!

- 1 Guardian's Medical Underwriting Team moves through the EOI process and will contact you with any questions.
- 2 We will send you a letter in the mail regarding the status of your request for coverage.
- 3 We will notify your employer of the outcome of your request only if your coverage amount is changed.

If you have questions about the process or if you need to provide evidence of insurability, please contact your Plan Administrator.

The Guardian Life Insurance Company of America New York, NY

guardiananytime.com

*Applicable to coverage requiring full Evidence of Insurability (not applicable to conditional issue amounts). Electronic EOI is not available in New York and New Hampshire. Electronic EOI is available using most internet browsers.

 $Guardian \hbox{$^{@}$ is a registered service mark of The Guardian Life Insurance Company of America.} \\$

WorkLifeMatters

Your Confidential Employee Assistance Program – Helping find balance between work and home life.

WorkLifeMatters provides guidance for personal issues that you might be facing and information about other concerns that affect your life, whether it's a life event or on a day-to-day basis.

- Unlimited free telephonic consultation with an EAP counselor available 24/7 at 800-386-7055
- Referrals to local counselors up to three sessions free of charge
- State-of-the-art website featuring over 3,400 helpful articles on topics like wellness, training courses, and a legal and financial center

WorkLifeMatters can offer help with:		
Education - Admissions testing & procedures - Adult re-entry programs - College Planning - Financial aid resources - Finding a pre-school	Dependent Care & Care Giving - Adoption Assistance - Before/after school programs - Day Care/Elder Care - Elder care - In-home services	Legal and financial Basic tax planning Credit & collections Debt Counseling Home buying Immigration
Lifestyle & Fitness Management - Anxiety & depression - Divorce & separation - Drugs & alcohol	Working Smarter - Career development - Effective managing - Relocation	

For more information about WorkLifeMatters, go to www.ibhworklife.com; User Name: Matters; Password: wlm70101

WorkLifeMatters 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 WorkLifeMatters will not be provided in connection with or preparation for any action against Guardian, IBH, or your employer.