VOLUNTARY BENEFITS GUIDE

Saltchuk 2026

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Introduction

Welcome to Gallagher vChoice. This unique program allows you to fill in the benefit gaps based on you and your family's individual needs. By carefully selecting and combining competitive insurance companies and providers, Gallagher vChoice offers you choices and convenience not found anywhere else.

Who is eligible?

After completing your employer's probationary period, all "actively at work" eligible employees are qualified to enroll in Gallagher vChoice. Dependents are also eligible to enroll in certain benefits (double coverage is not allowed).

When and how do I enroll?

You may enroll when you first become eligible or during annual open enrollment. You may also enroll or change coverage if you have a qualified change in status. These are the only times you are eligible to enroll in Gallagher vChoice.

To enroll, you must log in to the Gallagher vChoice enrollment website and complete your elections. Some benefits require additional forms to be completed before coverage becomes effective. Please see "How to Enroll" for further details.

Generally, changes can only be made at open enrollment. There are a few exceptions:

- You may enroll a new spouse or new child within one month of the date of marriage or birth/adoption.
- You may terminate your spouse if divorced or legally separated, or he/she dies or becomes disabled for more than one month.
- You must terminate any child who no longer qualifies as a dependent.
- You may change your coverage if, loss or gain of other coverage has occurred.
- You must terminate coverage if you are transferred to an employment status not eligible to participate in Gallagher vChoice; however, continuation of coverage is available for some policies. Please refer to the policy listings in this guide for more details.
- You may change or terminate coverage if either you or your spouse goes on an unpaid leave of absence.

Changes due to qualifying events must be consistent with the event.

What occurs at open enrollment?

At open enrollment, you can add or delete dependents and enroll in or terminate any coverage.

If you had a salary change during the prior year, any affected coverage will be automatically adjusted at open enrollment. In addition, costs may change due to a change in rates by the insurance company. Some policies' rates will increase as you age.

Who can I contact if I have a question or need help?

Gallagher vChoice is co-sponsored by your employer and Arthur J. Gallagher & Co. A team of Benefit Advocates is available to answer questions and provide help when you need it.

Arthur J. Gallagher & Co.
777 - 108 Ave NE, Suite 200
Bellevue, WA 98004-5120

Aloha Air Cargo - (833) 535-9195 - bac.alohaaircargo@ajg.com
Carlile Transportation Systems - (833) 535-9198 - bac.carliel@ajg.com
Foss Maritime Company - (833) 535-9193 - bac.foss@ajg.com
Hawaii Petroleum - (833) 535-9192 - bac.hawaiipetroleum@ajg.com
Northern Aviation Services - (833) 535-9199 - bac.northernaviationservices@ajg.com
NorthStar Energy - (833) 535-9196 - Bac.northstarenergy@ajg.com
Saltchuk Resources - (833) 535-9180 - bac.saltchuk@ajg.com
TOTE - (833) 535-9194 - bac.TOTE@ajg.com
Tropical Shipping - (833) 535-9274 - bac.tropicalshipping@ajg.com
Shoreside Logistics - (833) 232-7842 - bac.shoreside@ajg.com
Saltchuk Marine - (833) 222-0281 - bac.saltchukmarine@ajg.com
AmNav Maritime - (833) 800-6484 bac.amnav@ajg.com
Cook Inlet Tug and Barge - (833) 800-6485 - bac.cookinlet@ajg.com

Who pays if I have a claim?

All claims are paid by the underwriting insurance company.

If you need to make a claim, contact your employer to begin the necessary paperwork. A team of Benefit Advocates is also available assist you during the process. To contact a Benefit Advocate, please see contact information on page 1.

Where can I get information about my coverage?

This guide contains general information regarding coverage available through Gallagher vChoice. Detailed information can be found in the Certificates of Coverage. To receive a Certificate of Coverage, please contact your employer.

Important Terms

Eligibility Date

This is the effective date of coverage.

Evidence of Insurability (EOI)

Document used for medical underwriting. You may be required to complete this form if you choose to enroll after your initial eligibility date or you request an amount over the Guarantee Issue.

Guarantee Issue

The amount of coverage you are guaranteed to receive without completing a medical questionnaire.

Principal Sum

The amount of coverage you purchase.

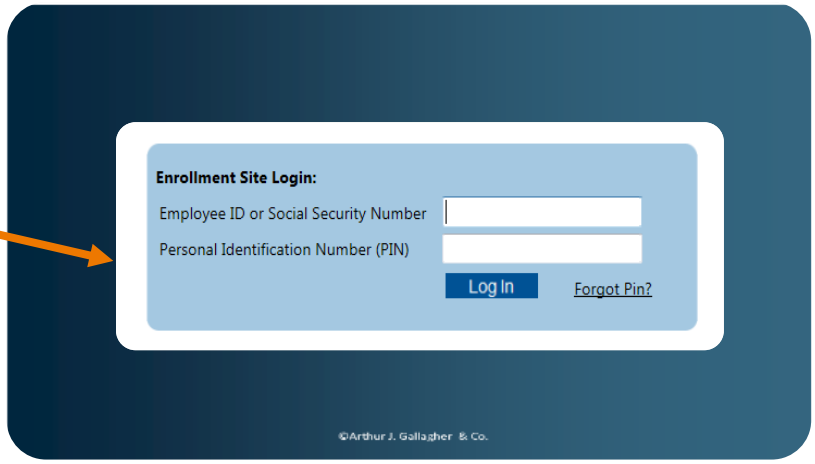
How to Enroll

You may enroll in Gallagher vChoice through the enrollment website. If you have any questions regarding your benefits or enrollment, please contact your employer or a Benefit Advocate.

Enrolling in Gallagher vChoice

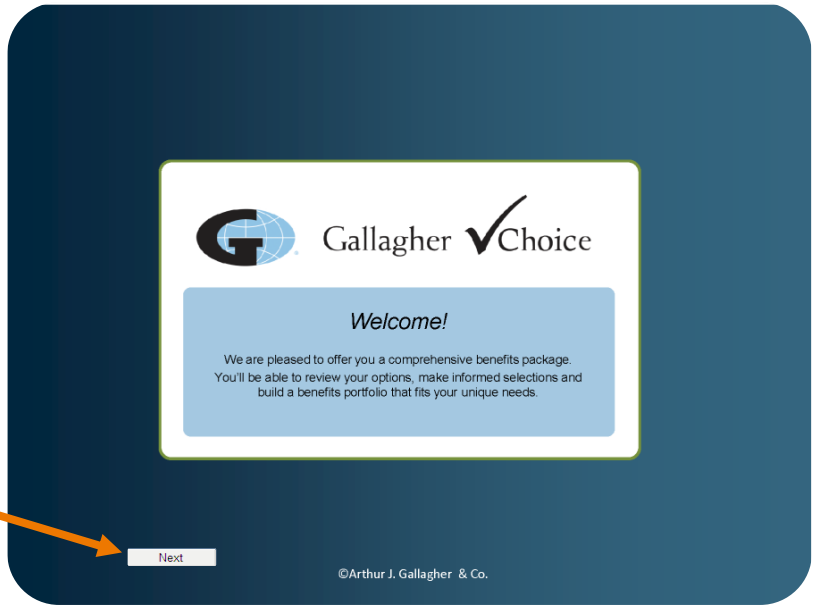
- Enrollment Site: www.GallaghervChoiceEnroll.com
- PIN: The last four digits of your Social Security Number followed by the two digit year of your birth.
  Ex: Someone born in 1980 and with a SSN of xxx-xx-1234 would have the PIN 123480.

Enter in the administrative website address in your Internet browser. On the home page, enter your Social Security and Password (details above) and click on “Log In”.



Click “Next” to begin the enrollment process. Fill in the requested information on each screen, clicking “Next” once complete.

Elections and/or changes will not be finalized until you have reached the end of all coverage options, PIN has been signed, and you receive your Summary of Benefits confirmation.



Term Life Insurance

As your lifestyle, family and income changes, so does your need for life insurance. Now is a good time to review your life insurance protection and make sure it has kept pace with inflation and your changing needs. You have the opportunity to enroll in a special voluntary life plan sponsored by your employer and underwritten by UNUM.

Benefits

You may elect term life insurance coverage in an amount between 1 to 5 times your annual earnings up to $750,000 (individual options are listed on the Gallagher vChoice enrollment website). Your spouse/domestic partner may enroll in coverage up to 100% of the approved employee amount. You may elect $10,000 of coverage for each of your eligible children (coverage is reduced to $1,000 for children between birth to 6 months old).

If you (or your spouse/domestic partner) would like to increase the term life insurance coverage, you must wait until the next open enrollment period to do so. You may also be required to submit a medical Evidence of Insurability form to UNUM for approval.

Benefits are paid to your designated beneficiary in the event you die from any cause (except as noted in the Exclusions and Limitations below). If you enroll your spouse/domestic partner or child, you will automatically be the beneficiary of your spouse/domestic partner's or child's coverage.

Eligibility

Term life insurance is available to:

- Employee
- Spouse/Domestic Partner
- Children to age 26 (includes your natural offspring, adopted children, stepchildren, domestic partner's dependents and foster children)

You must enroll in employee term life coverage in order to enroll your spouse/domestic partner and/or dependents.

Please note: Dependent Coverage: Insurance coverage is not allowed if that dependent is totally disabled on the date that insurance would otherwise be effective. **This means you may not enroll or increase coverage if your dependent meets the definition of "Totally Disabled".**

If your eligible dependent is totally disabled, your dependent's coverage will begin on the first of the month following the date your eligible dependent no longer is totally disabled. This provision does not apply to a newborn child while dependent insurance is in effect.

"Totally disabled" means that, as a result of an injury, a sickness or a disorder, your dependent is confined in a hospital or similar institution; is unable to perform two or more activities of daily living (ADLs) because of a physical or mental incapacity resulting from an injury or a sickness; is cognitively impaired; or has a life threatening condition.

Exclusions and Limitations

As is permitted under the Age Discrimination and Employment Act, your maximum allowable coverage will be reduced to:

- 65% of your coverage amount at age 70
- 50% of your coverage amount at age 75

Continuation of Coverage

Continuation of coverage options are available should you wish to continue term life insurance when you would otherwise lose coverage (i.e., your employment terminates). Please see your employer for details.

Guaranteed Coverage

Your coverage may be guaranteed if you enroll during your initial open enrollment period or within 31 days of first becoming benefit eligible. Guarantee Issue is only available during the initial enrollment period. Spouse/domestic partner Guarantee Issue amounts are 50% of the employee amounts and $10,000 per child.

Adding or increasing coverage may require that you submit an Evidence of Insurability form. Once you have been approved for coverage, the insurance company cannot cancel it due to declining health.

Please note: You will be billed your election amount up to the Guarantee Issue beginning on your eligibility date. Any amount you elect in excess of the Guarantee Issue will be effective the first day of the month following approval from underwriting.

If you are electing an amount above the Guarantee Issue you must complete the Evidence of Insurability form. If you or your family wishes to enroll more than 31 days after you become eligible, you must wait until the next open enrollment. Guarantee Issue coverage will not be available to you at that time and you must complete an Evidence of Insurability form.

For current participants: Please be aware that if you are declined due to adverse health for any amounts above the Guarantee Issue, you will be locked at Guarantee Issue regardless of any future salary changes.

Important Notes

Waiver of Premium
If you become totally disabled before age 60 and your disability lasts at least 9 months, you may be eligible for a Waiver of Premium. You must complete the Waiver of Premium application. If the application is approved, your coverage will continue, at no cost to you, as long as you are under age 65 and continue to remain disabled. Please see your employer for further information.

Accelerated Benefits
If a doctor certifies you are terminally ill and not expected to live more than 12 months, you may request up to 75% of your life insurance amount be paid to you. Please see your employer for further information.

Accidental Death & Dismemberment

This benefit covers you against accidents occurring on or off the job, in or away from home, with no geographical limits. Accidental Death & Dismemberment insurance is offered through The Standard.

Benefits

You may purchase coverage for yourself in multiples of $100,000 up to $500,000 (not to exceed 10 times your annual earnings). Spouse/Domestic Partner in multiples of $50,000 up to $250,000 (not to exceed 50% of your coverage), and $10,000 for your Children.

If a covered loss occurs while insured under this plan, benefits are payable to you, if living. Benefits payable because of loss of your life or coma will be paid to the Beneficiary you name.

The amount payable is a percentage of the AD&D Insurance Benefits or the Dependents AD&D Insurance Benefits in effect on the date of the accident and is determined by the Loss suffered as shown in the following table:

Loss	Percentage Payable
a. Life	100%
b. One Hand or One Foot	50%
c. Sight in one eye, speech, or hearing in both ears	50%
d. Two or more of the Loses listed in b. and c. above	100%
e. Thumb and index finger of the same hand	*25%
f. Quadriplegia	**100%
g. Hemiplegia	**50%
h. Paraplegia	**75%
i. Uniplegia	**25%
j. Coma	***1%

* No AD&D Insurance Benefits will be paid for Loss of thumb and index finger of the same hand if an AD&D Insurance Benefit is payable for the Loss of that entire hand.

** No AD&D Insurance Benefit will be paid for loss of function of a hand or foot if an AD&D Insurance Benefit is payable for Quadriplegia, Hemiplegia, Uniplegia or Paraplegia involving that same hand or foot.

***Per month of the remainder of the AD&D Insurance Benefit payable for Loss of life after reduction by any AD&D Insurance Benefit paid for any other Loss as a result of the same accident. Payments for coma will not exceed a maximum of 12 months.

No more than 100% of your AD&D Insurance Benefit will be paid for all Losses resulting from one accident.

Additional Benefits

- Seat Belt Benefit
- Air Bag Benefit
- Repatriation Benefit
- Career Adjustment Benefit
- Child Care Benefit
- Higher Education Benefit

Guaranteed Coverage

Accidental Death & Dismemberment coverage is offered on a guaranteed issue basis – no medical questions must be answered in order to enroll in coverage.

Eligibility

AD&D insurance is available to:

- Employee
- Spouse/Domestic Partner
- Children to age 26 (includes your natural children, adopted children, stepchildren, or children of your Spouse/Domestic Partner)

Coverage will end when employment terminates.

Active Work Requirement

If you are incapable of Active Work because of Sickness, Injury or Pregnancy on the day before the scheduled effective date of your insurance or an increase in your insurance, your insurance or increase in your insurance will not become effective until the date after you complete one full day of Active Work as an eligible Member.

Additional Features

- Higher Repatriation Benefit - provides coverage for unexpected hardship during employee travel, both for business and leisure. If an insured employee's death occurs while traveling more than 200 miles from the employee's residence, The Standard helps cover the expenses incurred when transporting the remains back home.

The Standard's Family Benefits Package extends financial assistance to eligible family members in the event of an employee's accidental death for which AD&D insurance benefits are payable:

- Higher Education Benefit. Pays for qualifying tuition expenses incurred by an employee's eligible children. The benefit is paid annually per child, for a maximum of four consecutive years beginning on the date of the employee's death. The benefit will not exceed $5,000 per year, or the cumulative total of $20,000 or 25 percent of the employee's AD&D insurance benefit - whichever is less.
- Career Adjustment Benefit. Pays for qualifying tuition expenses incurred by an employee's eligible spouse for training aimed at obtaining employment or increasing earnings within 36 months of the date of the insured's death. The benefit will not exceed $5,000 per year, or the cumulative total of $10,000 or 25 percent of the employee's AD&D insurance benefit - whichever is less.
- Career Child Care Benefit. Pays for qualifying child care costs incurred by an employee's spouse in order to work or obtain training aimed at securing employment or increasing earnings within 36 months after the date of the employee's death. The benefit will not exceed $5,000 per year, or the cumulative total of $10,000 or 25 percent of the employee's AD&D insurance benefit - whichever is less.

Exclusions

No AD&D Insurance Benefits are payable if the accident or Loss is caused or contributed to by any of the following:

1. War or act of War. War means declared or undeclared war, whether civil or international, and any substantial armed conflict between organized forces of a military nature
2. Suicide or other intentionally self-inflicted Injury, while sane or insane.
3. Committing or attempting to commit an assault or felony, or actively participating in a violent disorder or riot. Actively participating does not include being at the scene of a violent disorder or riot while performing official duties.
4. The voluntary use or consumption of any poison, chemical compound, alcohol or drug, unless used or consumed according to the directions of a Physician.
5. Sickness or Pregnancy existing at the time of the accident or exposure.
6. Heart attack or stroke.
7. Medical or surgical treatment or diagnostic procedure for any of the above.
8. Boarding, leaving, or being in or on any kind of aircraft. However, this exclusion will not apply if the person who suffers the Loss is a fare paying passenger on a commercial aircraft.

Critical Illness

Medical insurance alone can't stop a major diagnosis from draining your finances. Copays, deductibles, alternative treatments — these unexpected expenses add up quickly. Critical Illness insurance provides an affordable option for easing the financial burden that can come with a serious illness. Under this plan, children are automatically covered at no extra cost. The critical illness benefit is offered through Standard Insurance Company.

Benefits

Critical illness insurance will pay a lump sum benefit upon diagnosis of a covered critical illness. You may select one of the following benefit amounts for yourself: $15,000. You can also select $15,000 for your spouse. Children are automatically included at 25% of your amount.

Covered Illness	Maximum Benefit
• Cancer • Heart Attack • Stroke • End-Stage Renal Disease • Major Organ Transplant • Coma • Paralysis • Blindness • Occupational Hepatitis • Occupational HIV • 21 Childhood Diseases	100% of the Benefit Amount
• Carcinoma in Situ • Severe Coronary Artery Disease	25% of the Benefit Amount

Health Screening Benefit ($50 per year)	
• Mammography • Stress test on bicycle or treadmill • Pap Smear • Lipid Panel ABI – Screening for peripheral vascular disease • PSA (Blood Test for Prostate Cancer) • CA 15-3 for Breast Cancer • CEA Blood Test for Colon Cancer • Biopsies for cancer • HPV vaccination	• Bone density screening • EKG • Complete Blood Count (CBC) • Hemoglobin A1C • Colonoscopy • Breast Ultrasound • CA 125 for Ovarian Cancer • Hemocult Stool Analysis • Comprehensive Metabolic Panel (CMP) Abdominal aortic aneurysm ultrasound

Eligibility

Critical illness coverage is available to the following. Please note, an employee must enroll in order to cover any dependents.

- Employee (18 -70 years old)
- Spouse/Domestic Partner (18-70 years old)
- Children to age 26 (includes your natural offspring, adopted children, stepchildren, domestic partner's dependents and foster children)

Exclusions and Limitations

Benefits are not payable if a critical illness is caused or contributed to by any of the following:

- War or act of War.
- Attempted suicide or other intentionally self-inflicted Injury, while sane or insane.
- Committing or attempting to commit an assault, felony, act of terrorism, or actively participating in a violent disorder or riot.
- Alcoholism or drug addiction.
- Initial diagnosis outside of the United States.
- Elective surgery or other procedure which:

Does not promote the proper function of the body or prevent or treat sickness or injury.

Is directed at improving the insured's appearance, unless such surgery or procedure is necessary to correct a deformity resulting from a congenital abnormality or disfigurement.

This exclusion will not apply to a Critical Illness caused or contributed to by donation of an organ or tissue.

Continuation of Coverage

Continuation of coverage is available should you wish to continue critical illness insurance when you would otherwise lose coverage (i.e., your employment terminates). Please see your employer for details.

Guaranteed Coverage

Critical Illness coverage is offered on a guaranteed issue basis – no medical questions must be answered in order to enroll in coverage.

Important Notes

Additional Occurrence Benefit:

If you are diagnosed with a different and subsequent covered illness at least 90 days after the diagnosis of the first critical illness, you will receive an additional critical illness insurance benefit.

Recurrence Benefit:

If you are diagnosed with a covered illness again after a treatment free period of 12 months, you will receive 25 percent of the original benefit amount.

Pre-Existing Condition

Preexisting conditions can affect your coverage if they occurred at any time during the 12 month period just before the date your or your dependent's insurance or an increase in coverage amount becomes effective. Preexisting conditions are defined as:

A mental or physical condition (whether or not diagnosed or misdiagnosed) for you or your dependent consulted a physician or other licensed medical professional; received medical treatment, services or advice; undergone diagnostic procedures including self-administered procedures or taking prescribed drugs or medications.

A mental or physical condition that was discovered or suspected as a result of any medical examination, including a routine examination.

You or your dependent will not be covered for a critical illness (or an increase in coverage) if it is caused or contributed to by a preexisting condition or medical or surgical treatment of a preexisting condition. The preexisting condition will be covered if, on the day you or your dependent incur the critical illness:

You or your dependent have been continuously insured under the group policy for 12 months.

You have been actively at work for at least a full day after the end of that 12 months.

Accident

Nobody plans to have an accident — and most people don't budget for one, either. Accident insurance helps you pay for out-of-pocket expenses medical insurance won't cover. If your covered child gets injured while participating in an organized sport, you'll receive an additional 25 percent of the total benefit paid. It's an affordable way for you to keep your financial lives moving in the right direction. The accident benefit is offered through Standard Insurance Company.

Benefits

The following table lists benefits available through the accident policy.

Accident/Injury	Benefit Amount
Accident Emergency Treatment	$150
Accident Follow-Up Visit (up to 2 visits per person, per accident)	$50
Accidental Death*	
Employee	$50,000
Spouse/Domestic Partner	$25,000
Child	$12,500
*The accidental death benefit increases if the accidental death occurs on a common carrier. Employee-$100,000; Spouse/Domestic Partner-$50,000; Child-$25,000	
Accidental Dismemberment*	
Loss of two or more digits	$5% of Accidental Death benefit
Loss of one hand; or one foot; loss of sight of one eye; loss of hearing of one ear	15% of Accidental Death benefit
Loss of one hand and one foot; loss of both hands or both feet; or the loss of sight of both eyes; or loss of hearing in both ears	30% of Accident Death benefit
Admission*	
Hospital Admission Benefit	$1,000
Intensive Care Unit Admission Benefit	$750
*Note: The Intensive Care Unit Admission Benefit pays in addition to the Hospital Admission Benefit.	
Ambulance	
Ground Ambulance Benefit	$300
Air Ambulance Benefit	$800

Accident/Injury	Benefit Amount
Appliance and Prosthetic Device	
Appliance Benefit (crutches,etc.)	$100
Prosthetic Device Benefit	$500 for one device $1,000 for two or more devices
Blood/Plasma/Platelets Administration	$300
Burns*	
2nd degree burns covering at least 15% of the body surface	$200
2nd degree burns covering over 15% of the body surface	$1,000
3rd degree burns covering at least 15% of the body surface	$5,000
3rd degree burns covering over 15% of the body surface	$10,000
Burn requiring skin graft	additional 25% of the applicable burn benefit
Coma	$7,500
Complete Dislocation (Separated Joint)	
Hip	Closed Reduction: $2,500 Open Reduction: $5,000
Knee (except patella)	Closed Reduction: $900 Open Reduction: $1,800
Ankle – bone/bones of the foot (other than toes)	Closed Reduction: $800 Open Reduction: $1600
Collarbone (sternoclavicular)	Closed Reduction: $800 Open Reduction: $1,600
Lower jaw	Closed Reduction: $800 Open Reduction: $1600
Shoulder	Closed Reduction: $800 Open Reduction: $1600
Elbow	Closed Reduction: $800 Open Reduction: $1600
Wrist	Closed Reduction: $800 Open Reduction: $1600
Bone/bones of the hand (other than fingers)	Closed Reduction: $800 Open Reduction: $1600
Collarbone (acromioclavicular and separation)	Closed Reduction: $400 Open Reduction: $800
One toe or finger	Closed Reduction: $150 Open Reduction: $300
Note: If an Insured Person sustains more than one dislocation in a Covered Accident, payment is made for each dislocation. There is not a maximum benefit amount for dislocation. Partial dislocations are paid at 25% of the associated dislocation.	

Accident/Injury	Benefit Amount
Concussion	$150
Confinement*	
Hospital Confinement Benefit	$200 per day, up to 365 days
Intensive Care Unit Confinement Benefit	$200 per day, up to 15 days
Rehabilitation Unit Confinement Benefit	$100 per day, up to 15 days
*Note: The Intensive Care Unit Confinement Benefit pays in addition to the Hospital Confinement Benefit.	
Emergency Dental Work	
Broken tooth repaired with a crown, denture or implant	$200
Broken tooth resulting in extraction	$100
Eye Injury*	$200
Family Lodging	$175 per night, up to 30 days per covered accident.
Fracture (Broken Bone)*	
Skull (except bones of face or nose), depressed skull fracture	Closed Reduction: $4,000 Open Reduction: $8,000
Skull (except bones of face or nose), Simple non-depressed skull fracture	Closed Reduction: $1,500 Open Reduction: $3,000
Hip)	Closed Reduction: $2,500 Open Reduction: $5,000
Vertebral column	Closed Reduction: $1,200 Open Reduction: $2,400
Pelvis	Closed Reduction: $1,200 Open Reduction: $2.400
Leg (Hip to knee)	Closed Reduction: $2,000 Open Reduction: $4,000
Leg (Knee to ankle)	Closed Reduction: $1,200 Open Reduction: $2.400
Bones of face or nose	Closed Reduction: $500 Open Reduction: $1,000
Arm	Closed Reduction: $500 Open Reduction: $1,000
Lower jaw, mandible (except alveolar process)	Closed Reduction: $550 Open Reduction: $1,100
Shoulder blade (scapula) and/or collarbone (clavicle, sternum)	Closed Reduction: $550 Open Reduction: $1,100

Accident/Injury	Benefit Amount
Fracture (Broken Bone)* continued	
Vertebral processes	Closed Reduction: $500 Open Reduction: $1,100
Forearm (radius and/or ulna), hand, wrist (except fingers)	Closed Reduction: $550 Open Reduction: $1,100
Kneecap (patella)	Closed Reduction: $550 Open Reduction: $1,100
Foot (except toes)	Closed Reduction: $550 Open Reduction: $1,100
Ankle	Closed Reduction: $550 Open Reduction: $1,100
Rib	Closed Reduction: $400 Open Reduction: $800
Coccyx	Closed Reduction: $500 Open Reduction: $1,000
Finger, toe	Closed Reduction: $100 Open Reduction: $200
*Note: If an Insured Person sustains more than one fracture in a Covered Accident, payment is made for each fracture. There is not a maximum benefit amount for fractures. Chip fractures are paid at 25% of the associated fracture.	
Major Diagnostic Exam	$200
Laceration (cut)	
Total of all lacerations is less than 2 inches long	$75
Total of all lacerations is at least 2 but less than 6 inches long	$200
Total of all lacerations is 6 inches or longer	$500
Physical or Occupational Therapy	$50 per day, up to 3 days
Surgery	
Open Abdominal; Thoracic surgery	$1,500
Ruptured Disc with surgical repair	$750
Exploratory and Arthroscopic Surgery	$200
Knee Cartilage Torn – repair	$750
Knee Cartilage Exploratory Surgery	$200
Tendon; Ligament or Rotator Cuff Surgery	
one	$750
two or more	$1,000
Transportation The transportation benefit covers insured persons required to travel more than 100 miles one way from his or her residence for treatment of Injuries resulting from a Covered Accident. This benefit is not payable when the Insured Person is transported by an ambulance.	$150, up to 30 days per Insured Person per covered accident.
X-Ray	$50

Additional Benefits

Youth Organized Sports Benefit

A Youth Organized Sports benefit is included with child coverage. If a covered child aged 18 or younger is injured while playing an organized sport, an additional 25% of the total benefit will be paid.

Automobile Accident Benefit

The Automobile Accident Benefit pays an additional $500 if the insured is injured in an automobile accident.

Eligibility

Accident coverage is available to:

- Employee (18-70 years old)
- Spouse/Domestic Partner (18-70 years old)
- Children to age 26 (includes your natural offspring, adopted children, stepchildren, domestic partner's dependents and foster children)

Exclusions and Limitations

- Benefits are not payable if the accident was caused or contributed by any of the following:
- War or act of War.
- Suicide or other intentionally self-inflicted Injury, while sane or insane.
- Committing or attempting to commit an assault, felony, act of terrorism, or actively participating in a violent disorder or
- riot.
- Sickness existing at the time of the Accident, including any medical or surgical treatment or diagnostic procedure for a
- Sickness.
- Travel or flight in or on any aircraft (certain exceptions apply, including as a fare paying passenger on a regularly
- scheduled commercial flight).
- Engaging in high risk sports or activities.
- Practicing for, or participating in, any semi-professional or professional competitive athletic contests.
- Routine eye exams and dental procedures other than a crown or extraction for a tooth or teeth as a result of a Covered
- Accident.
- Riding in or driving any automobile in a race, stunt show, or speed test.
- Cosmetic surgery, unless such surgery or procedure is necessary to correct a deformity or restore bodily function
- resulting from a Covered Accident.
- Any Accident which arises out of or in the course of the insured's incarceration in a jail, penal, or correctional institution.

Continuation of Coverage

Continuation of coverage is available should you wish to continue injury/accident insurance when you would otherwise lose coverage (i.e., your employment terminates). Please see your employer for details.

Guaranteed Coverage

Accident coverage is offered on a guaranteed issue basis – no medical questions must be answered in order to enroll for coverage.

MetLife Legal Plans

Most of us will need legal assistance at some point in time. Whether it is help with drafting a will or purchasing a home, a legal plan can give you the help you need, yet may not otherwise be able to find or afford. The legal service plan is offered through MetLife Legal Plans®.

Benefits

MetLife Legal Plans® provides you with telephone and office consultations for a number of legal matters. During the consultation, the attorney will review the law, discuss your rights and responsibilities, explore your options and recommend a course of action. This benefit can be used to assist you and your immediate family with many issues, including those listed below.

Law for Family & Personal	Law for Money Matters	Law for Home & Real Estate	Law for Vehicle & Driving	Civil Lawsuits
Will preparation, adoption, guardianship, name change, review of any personal legal document and affidavits	Negotiations with creditors, debt collection defense, personal bankruptcy and notes	Foreclosure, refinancing, deeds, mortgages, zoning applications and property tax assessments	Repossession, defense of traffic tickets and license suspension due to DUI	Civil litigation defense, small claims assistance, pet liabilities and incompetency defense

Attorney Services for Non-Covered matters- 4 hours - For non-covered matters that are not otherwise excluded, this benefit provides four hours of attorney time and services per year. The Participant is responsible to pay fees beyond the 4 hours. No more than a combined maximum total of four hours of attorney time and service are provided for the member.

Eligibility

MetLife Legal Plans® is available to:

- Employee
- Spouse/Domestic Partner
- Children (includes your own natural offspring, adopted children, stepchildren, domestic partner's dependents and foster children)

Exclusions and Limitation

Excluded services are those legal services that are not provided under the plan. No services, not even a consultation, can be provided for the following matters:

- Employment-related matters, including company or statutory benefits.
- Matters involving the company, MetLife and affiliates, and Plan Attorneys.
- Matters in which there is a conflict of interest between the employee and spouse or dependents in which case services are excluded for the spouse and dependents.
- Appeals and class actions.
- Farm matters, business or investment matters, matters involving property held for investment or rental, or issues when the Participant is the landlord.
- Patent, trademark and copyright matters.
- Costs or fines.
- Frivolous or unethical matters.
- Matters for which an attorney-client relationship exists prior to the Participant becoming eligible for plan benefits.

For questions about exclusions and limitations, please contact MetLife Legal Plans® at 800-821-6400. More information can also be found at www.members.legalplans.com.

Continuation of Coverage

Continuation of coverage options are available should you wish to continue MetLife Legal Plans® when you would otherwise lose coverage (i.e., your employment terminates). Please see your employer for details.

Guaranteed Coverage

MetLife Legal Plans® is offered on a guaranteed issue basis.

Identity Fraud Protection

Identity theft is one of the fastest growing crimes in the world and can strike anyone at any time. Identity theft protection can help to proactively and effectively protect you and your family's personal information. Identity theft protection is offered through Allstate Identity Protection, Inc.

Benefits

Allstate offers consumers a comprehensive, proactive identity theft defense. Their proprietary technology makes Allstate Identity Protection more than enough to help fight 21st century crime.

	AIP *ProPlus* plan Features
Comprehensive monitoring and alerts	Proactive monitoring helps you stop fraud at its earliest sign and enables quick restoration for minimal damage and stress.
Enhanced identity monitoring	Our proprietary monitoring platform detects high-risk activity to provide rapid alerts at the first sign of fraud.
Dark web monitoring	In-depth monitoring goes beyond just looking out for a participant's Social Security number. Bots and human intelligence scour closed hacker forums for compromised credentials and other personal information. Then we immediately alert participants who have been compromised.
High-risk transaction monitoring	We send alerts for non-credit-based transactions like student loan activity and medical billing.
Account activity	You are alerted when unusual activity on your personal banking accounts could be a sign of account takeover.
Financial activity monitoring	Alerts triggered from sources such as bank accounts, thresholds, credit and debit cards, 401(k)s, and other investment accounts help you take control of your finances.
Social media monitoring	We keep tabs on social accounts for everyone in the family, watching for vulgarity, threats, explicit content, violence, and cyberbullying.
Lost wallet protection	Easily store, access, and replace wallet contents. Our secure vault conveniently holds important information from credit cards, credentials, and documents.
Solicitation reduction	We aid you in opting in or out of the National Do Not Call Registry, credit offers, and junk mail.
Digital exposure reports	You can see and identify where your personal information is publicly available on the internet.
Credit monitoring and alerts	Tri-bureau credit monitoring, Annual tri-bureau report and score Credit lock (adults & minors) Credit freeze assistance, TransUnion credit monitoring Credit score tracking. We alert for transactions like new inquiries, accounts in collections, new accounts, and bankruptcy filings.
Data breach notifications	We send alerts every time there's a data breach affecting you directly so you can take action immediately.
Credit assistance	Our in-house experts will help you freeze your credit files with the major credit bureaus. You can even dispute credit report items from your portal.
Sex offender notifications	Our monitoring system notifies you if a sex offender is registered in a nearby area.
Protect the entire family	We have a generous definition of family, covering those who live in the participant's household and those they take care of financially — everyone that's "under roof and wallet." If they are dependent on you financially or live under your roof, they're covered.
Full-service case management and resolution	We fully manage your restoration case, helping you save time, money, and stress.
$1 million identity theft insurance	If you fall victim to fraud, we will reimburse your out-of-pocket costs.†

†Identity theft insurance underwritten by insurance company subsidiaries or affiliates of Assurant. The description herein is a summary and intended for informational purposes only and does not include all terms, conditions and exclusions of the policies described. Please refer to the actual policies for terms, conditions, and exclusions of coverage. Coverage may not be available in all jurisdictions.

Eligibility

Identity theft protection is available to:

- Employee
- Spouse/Domestic Partner
- Children to age 26 (includes your natural offspring, adopted children, stepchildren, domestic partner's dependents and foster children)

Exclusions and Limitations

Some exclusions and limitations apply. For more information, please visit www.myaip.com or call 800.789.2720.

The intent of this outline is to briefly highlight key features of your plan and is not to replace your insurance contract, certificate or booklet. We have compiled information into summary form to outline answers to questions we most commonly receive. If this benefit outline does not address your specific benefit needs, you should contact the insurance carrier or refer to their contract, certificate or booklet for more specific information and limitations. The information provided in the enclosed material is for comparative and informational purposes only. Actual claims paid are subject to the terms and conditions of the individual carriers' contracts. Please review the carriers' contracts for more detailed information on the plans being offered. The descriptions in this brochure are HIGHLIGHTS only. Should any conflict arise between this brochure and the contracts underwritten by the insurance companies, the contracts will govern in all cases.

Gallagher

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