

Colonial Life®



PREPARED FOR

Imagine Solutions

BROUGHT TO YOU BY

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This proposal is valid for 90 days from the due date.

NS-16415 (1-19)



12/6/2019
Miranda Faulkner
30435 Commerce Drive
Unit 102
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At Colonial Life, we're committed to protecting your employees' families, finances and futures. Our voluntary benefits enable you to offer a competitive health and wellness plan that helps keep your employees happy and your business successful. By working together, we can design a flexible, personalized benefits plan that's right for you.

Our dedicated, responsive team is here to be a genuine partner with you and your employees – before, during and after enrollment with our people-powered technology. That means greater productivity for your business, real cost savings, and stronger employee engagement. No matter how complicated your enrollment situation may seem, we're here to handle it. Enclosed is our proposal to meet and exceed your benefit expectations.

What's Inside:

- **Our Recommended Benefits Strategy** summarizes the benefit suggestions we've prepared for you.
- **Value-Added Services** offer extra protection for your employees without impacting your budget.
- **The Colonial Life Experience** tells the story of how we'll work with you and your employees in the future.
- **Your Personalized Benefits Plan** outlines the affordable, quality benefit plans, rates and special underwriting offers that help protect your employees.
- **Plan Descriptions** detail the features of each protection plan available to your employees.

We appreciate the opportunity to partner with the Imagine Solutions. Please don't hesitate to reach out if you have any questions.

Shawn Flanders

Agency Manager

Our Recommended Benefits Strategy

Your goals are our goals

1. Communicate the full value of benefit options available to all employees.
2. Enroll your employees with technologies that seamlessly integrate with your existing systems.
3. Reduce expenses associated with enrollment, including materials, administrative overhead and IT costs.
4. Boost tax savings by educating employees on Section 125 plans and participation.
5. Drive benefits engagement and assist employee recruitment and retention.

We will deliver quality, flexible coverage and comprehensive customer service throughout the enrollment journey.

Delivering on Your Priorities

By meeting these goals, we'll address your top business priorities:

Managing rising health insurance costs

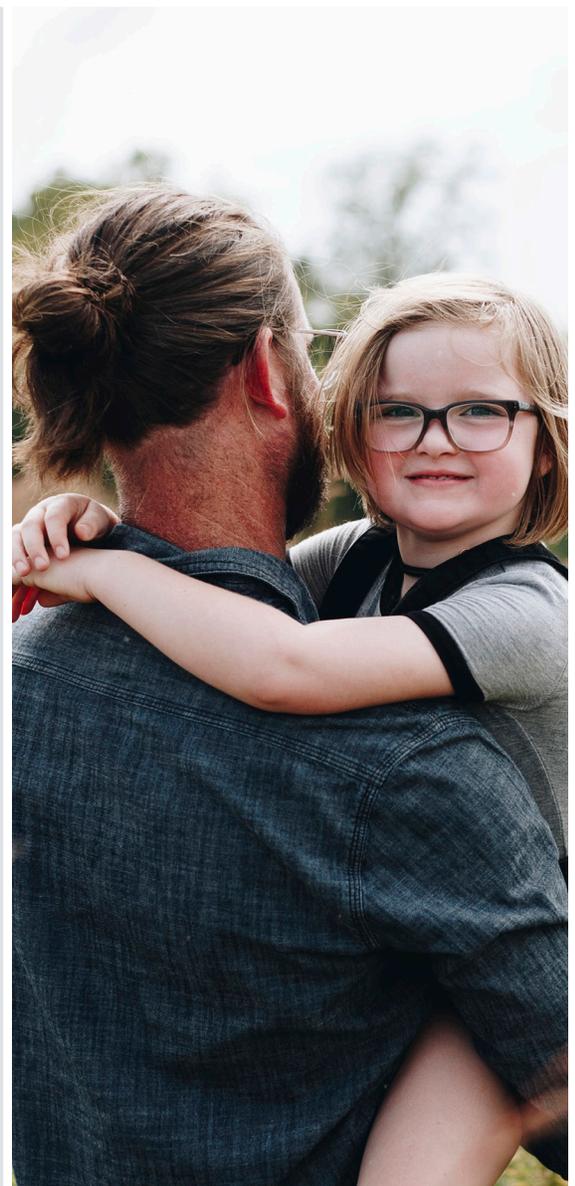
Our health and wellness benefits help protect your employees' quality of life while helping you manage rising insurance costs. They fill critical gaps in medical coverage and help you contain benefit costs using programs like dependent verification services.

Retaining your employees

You work hard to provide meaningful benefits for your employees. It's time for those benefits to work hard for you. Our benefit solutions help you retain high-performing employees with comprehensive protection and benefits.

Enhancing your recruiting

We're committed to helping you grow your business. That's why we offer high-quality benefits and protection that enable you to recruit the best and the brightest.



Our Approach

Guided by your needs, we've tailored an approach that offers Imagine Solutions and your employees the best experience in these three important areas:

Benefits Communication and Education

- **1-to-1 benefits counseling sessions** to help your employees understand their options so they can select a plan that's right for them.
- **Wellness check-up** to empower your employees to take advantage of your wellness programs.

Enrollment

- **Face-to-face enrollment** that offers the most engagement and the best opportunity to educate employees.

Cost Reduction

Our Benefits

Health and wellness benefits available to your employees include:

Life insurance

helps provide peace of mind and financial security for the people who matter to your employees, with flexibility to update coverage at each stage of life.

Disability income insurance

replaces a portion of an employee's income to help make ends meet if he or she becomes disabled from a covered accident or sickness.

Accident insurance

helps offset unexpected medical expenses that can result from a fracture, dislocation or other covered accidental injury.

Cancer insurance

helps offset the covered out-of-pocket medical and indirect, non-medical expenses related to cancer that most plans don't cover.

Critical illness insurance

supplements your major medical coverage by providing a lump-sum benefit that can be used to pay for the direct and indirect costs related to a covered critical illness.

Hospital indemnity insurance

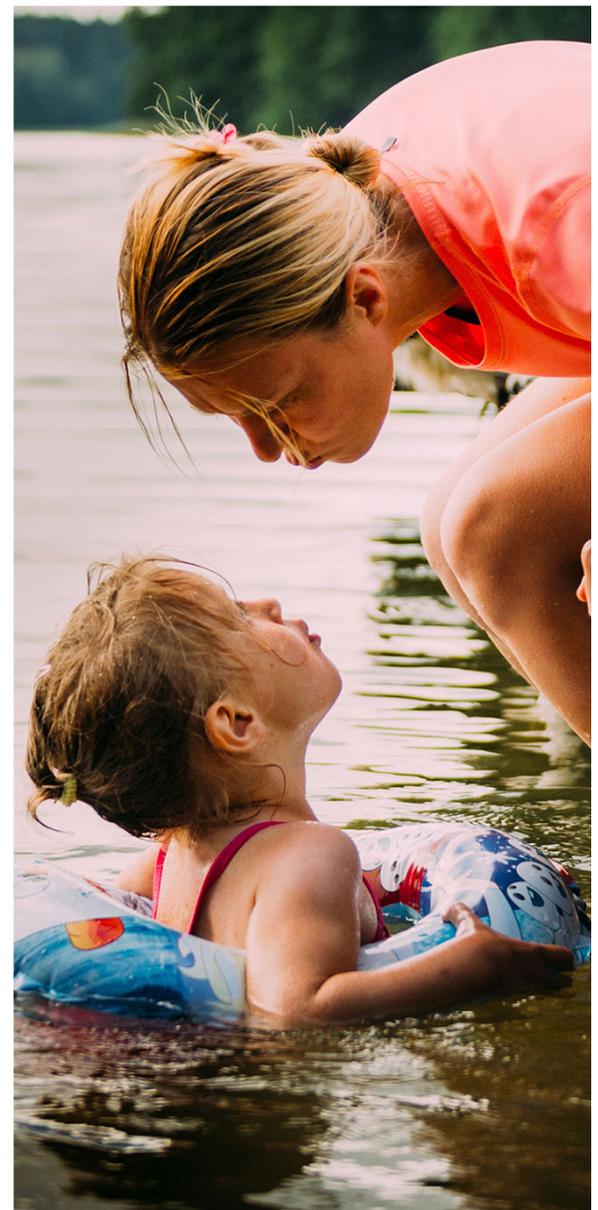
provides a lump-sum benefit for a covered hospital confinement or outpatient surgery to help with co-payments and deductibles.

Dental insurance

provides coverage for a variety of dental procedures, from routine cleanings to major services. Additional savings are available by visiting a network dentist.

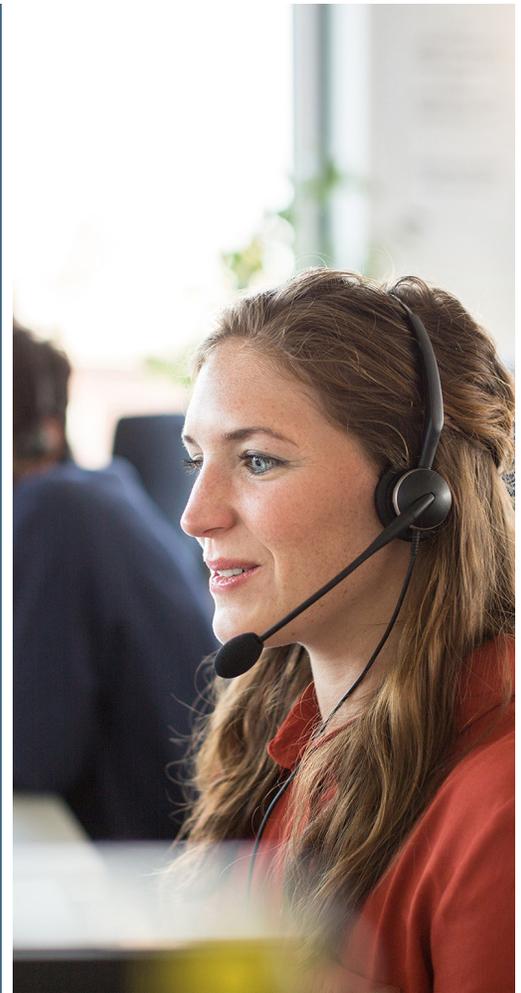


Benefits designed to empower your employees to work happier and healthier.



Technology Partners

Through our experience, we've earned a strong reputation for enrollment technology and flexible enrollment strategies with a human touch to support businesses like yours. We support multiple enrollment solutions and integration with a wide range of benefits administration and human resource information systems to give you streamlined benefits enrollment and administration. There is always someone available to help on the other side of the screen.



Harmony

Our award-winning enrollment system available to all accounts at no cost. It's a complete enrollment solution that supports 1-to-1, group meeting, call center, co-browsing and self-enrollment methods. Harmony features a secure, user-friendly interface that takes the hassle out of enrolling, communicating and administering employee benefit programs.

Our Value-Added Services

Additional benefits for your employees without impacting your budget

Your employees and their families deserve benefit solutions that improve their quality of life. That's why we're pleased to offer Imagine Solutions two additional health and wellness benefits, **one from our complimentary collection of services and one from our qualified collection.**

Qualified value-added option:

These additional benefits will be provided for free to your employees who attend open enrollment if at least 75% of your employee population attends their personal counseling session with one of our benefit counselors during open enrollment. Keep in mind that with our qualified programs, employees are under no obligation to purchase benefits.

Complimentary value-added service:

These additional benefits are available to your employees without impacting your budget.

Qualified value-added service:

Complimentary value-added service:

- **Health and services discount card**

WellCard provides discounts on prescription drugs, medical expenses and dental expenses, along with access to a telemedicine provider and medical bill consultation.

- **HRAnswersNow® resource website**

This complimentary human resources website includes a labor law library, state employment laws and templates for job descriptions and performance reviews.

*HRAnswersNow®, provided by CCH, is available with select insurance offerings. Terms and availability of service are subject to change. Services are not valid after coverage terminates. Please contact your benefits representative for details.

State restrictions may apply.

Some of these services require a minimum number of benefits-eligible employees to meet with a benefits representative during initial enrollment. Offers require home office approval. Some offers cannot be combined. Talk with your benefits representative for details.

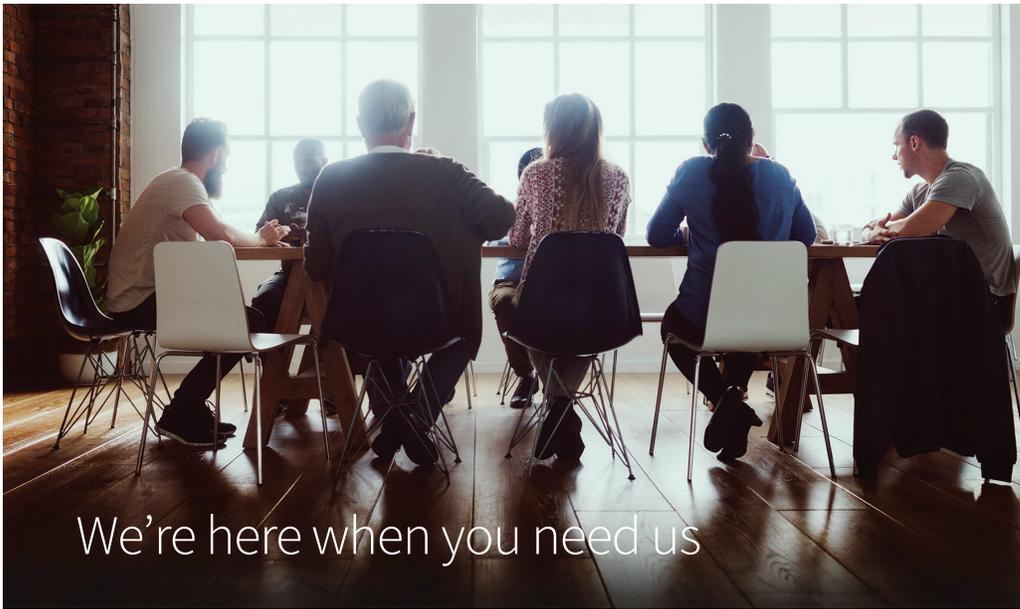
The Colonial Life Experience

A trusted partner

When you choose Colonial Life, you're choosing a partner committed to your employees' long-term health and wellness. We empower your employees to engage and increase the productivity of your business with quality, affordable benefit options without impacting your budget.

Through providing technology with a human touch, we have a proven track record of helping families prepare for and protect against unexpected challenges today to ensure the financial protection and peace of mind they deserve tomorrow. Working together, we'll deliver a valuable, comprehensive package that your employees need.





Employer and policyholder service is the central focus of our day-to-day operations.

For employees

From benefits education to paying claims, employees can count on us. The My Colonial Life for Policyholders website lets them file claims, check the status of an outstanding claim or review a policy.

Our easy eClaims site is there 24/7 and enables employees to sign up for direct deposit – the fastest way to collect payments. Most of your employees' claims will be paid in a single day.

And in their time of need, our service representatives will provide professional, personal service to your employees.

For employers

With 24/7 access to our plan administrator website, you'll be able to monitor and update your employees' personal information, change a tax status, cancel or reinstate policies and transfer files securely.

You can quickly pay bills and track their processing with our online bill pay. You'll also have your own dedicated billing specialist. We assist with premium processing and reconciling and resolving discrepancy premium.

We also offer the full **HRAnswersNow®** online repository for assistance with all your human resources, payroll and state law questions.





We're here to be a genuine partner with you and your employees – before, during and after enrollment.

Imagine Solutions's Personalized Benefits Plan

Affordable benefit rates

Colonial Life is pleased to offer these product and underwriting guidelines to Imagine Solutions. These approved underwriting guidelines will apply to all eligible employees who are actively at work during the upcoming enrollment.

Accident insurance

Cancer insurance

Critical illness insurance

Dental insurance

Disability insurance

Hospital indemnity insurance

Life insurance

Colonial Life®



Addendum

Benefit Descriptions

Cancer Assist
Critical Illness
Dental PPO
Individual accident
Individual disability
Individual Medical Bridge
Term life
Whole life



Individual Cancer Insurance

Colonial Life's individual cancer insurance product helps to provide valuable financial protection for America's workers and their families in times of need, when medical bills and other expenses related to cancer diagnosis and treatment may limit their ability to focus on what's most important – getting well. Employees can choose from four Benefit Levels. Coverage types available: Insured Only; Insured and Spouse; One-Parent Family and Two-Parent Family plans.

Product Features

- Guaranteed Renewability - Employees can keep the coverage for life as long as they pay premiums.
- Portability - Employees can keep the same coverage at the same rates if they change jobs or retire.
- Waiver of Premium - Premium payment is waived if the named insured is disabled due to cancer for longer than 90 consecutive days and the date of diagnosis is after the waiting period and while the policy is in force.
- Composite Premiums - All eligible applicants in an account have the same premium, regardless of risk class or age
- Direct Benefit Payment - Benefits are paid directly to the insured unless they specify otherwise.
- No Coordination of Benefits - Benefits are paid in addition to other insurance your employees may have with other insurance companies.
- Health Savings Account (HSA) Compatibility - This cancer insurance is HSA-compatible and allows employers to provide coverage that can be used alongside employees' Health Savings Accounts.
- Indemnity Benefits – Pays exactly what is listed for selected plan level.

Plan Design

There are a choice of levels (each level has the same benefits) allowing employees to select the benefit amounts that best suit them and their covered family members. The employer may allow his employees to choose from all four benefit levels or may limit the levels offered to his employees.

- Level 1
- Level 2
- Level 3
- Level 4

In addition to the standard plan benefits, three optional riders are available:

- Initial Diagnosis of Cancer Rider
- Initial Diagnosis of Cancer Progressive Payment Rider
- Specified Disease Hospital Confinement Rider

Optional Cancer Wellness/Health Screening benefits are also available.



Benefits for Cancer – Overview

Benefits are payable for each covered person under the policy. Benefits are payable only when charges are incurred.

Benefits	Level 1	Level 2	Level 3	Level 4
Air Ambulance, per trip <i>Maximum trips per confinement</i>	\$2,000 2	\$2,000 2	\$2,000 2	\$2,000 2
Ambulance, per trip <i>Maximum trips per confinement</i>	\$250 2	\$250 2	\$250 2	\$250 2
Anesthesia, General	25% of Surgical Procedures Benefit			
Anesthesia, Local, per procedure	\$25	\$30	\$40	\$50
Anti-Nausea Medication, per day <i>Maximum per month</i>	\$25 \$100	\$40 \$160	\$50 \$200	\$60 \$240
Blood/Plasma/Platelets/Immunoglobulins, per day <i>Maximum per calendar year</i>	\$150 \$10,000	\$150 \$10,000	\$175 \$10,000	\$250 \$10,000
Bone Marrow or Peripheral Stem Cell Donation, per donation, maximum one per lifetime	\$500	\$500	\$750	\$1,000
Bone Marrow Stem Cell Transplant, per transplant	\$3,500	\$4,000	\$7,000	\$10,000
Peripheral Stem Cell Transplant, per transplant <i>Maximum transplants per lifetime</i>	\$3,500 2	\$4,000 2	\$7,000 2	\$10,000 2
Companion Transportation, per mile <i>Maximum per round trip</i>	\$0.50 \$1,000	\$0.50 \$1,000	\$0.50 \$1,200	\$0.50 \$1,500
Egg (s) Extraction or Harvesting or Sperm Collection, one per lifetime	\$500	\$700	\$1,000	\$1,500
Egg (s) or Sperm Storage, one per lifetime	\$175	\$200	\$350	\$500
Experimental Treatment, per day <i>Maximum per lifetime</i>	\$200 \$10,000	\$250 \$12,500	\$300 \$15,000	\$300 \$15,000
Family Care, per day <i>Maximum per calendar year</i>	\$30 \$1,500	\$40 \$2,000	\$50 \$2,500	\$60 \$3,000
Hair/External Breast/Voice Box Prosthesis, per calendar year	\$200	\$200	\$350	\$500
Home Health Care Services, per day <i>Maximum per calendar year</i> <i>Examples include: physical therapy, occupational therapy, speech therapy, and audiology, prosthesis and orthopedic appliances and rental or purchase of medical equipment.</i>	\$50	\$75	\$100	\$150
	30 days or twice the days confined			
Hospice, Initial	\$1,000	\$1,000	\$1,000	\$1,000
Hospice, Daily <i>Maximum combined Initial and Daily per lifetime</i>	\$50 \$15,000	\$50 \$15,000	\$50 \$15,000	\$50 \$15,000
Hospital Confinement, 30 days or less, per day	\$100	\$150	\$250	\$350
Hospital Confinement, 31 days or more, per day	\$200	\$300	\$500	\$700

Applicable to FL

Cancer Assist PS01956

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Lodging, per day <i>Maximum days per calendar year</i>	\$50 70	\$50 70	\$75 70	\$80 70
Medical Imaging Studies, per study <i>Maximum per calendar year</i>	\$75 \$150	\$125 \$250	\$175 \$350	\$225 \$450
Outpatient Surgical Center, per day <i>Maximum per calendar year</i>	\$100 \$300	\$200 \$600	\$300 \$900	\$400 \$1,200
Private Full-time Nursing Services, per day	\$50	\$75	\$125	\$150
Prosthetic Device/Artificial Limb, per device or limb <i>Maximum per lifetime</i>	\$1,000 \$2,000	\$1,500 \$3,000	\$2,000 \$4,000	\$3,000 \$6,000
Radiation/Chemotherapy				
Injected chemotherapy by medical personnel, one per week	\$250	\$500	\$750	\$1,000
Radiation delivered by medical personnel, one per week	\$250	\$500	\$750	\$1,000
Self-Injected Chemotherapy, one per month	\$150	\$200	\$300	\$400
Pump Chemotherapy, one per month	\$150	\$200	\$300	\$400
Topical Chemotherapy, one per month	\$150	\$200	\$300	\$400
Oral Hormonal Chemotherapy (1-24 months), one per month	\$150	\$200	\$300	\$400
Oral Hormonal Chemotherapy (25+ months), one per month	\$75	\$100	\$150	\$200
Oral Non-Hormonal Chemotherapy, one per month	\$150	\$200	\$300	\$400
Reconstructive Surgery, per surgical unit <i>Maximum per procedure, including 25% for general anesthesia</i>	\$40 \$2,500	\$40 \$2,500	\$60 \$3,000	\$60 \$3,000
Second Medical Opinion, one per lifetime	\$150	\$200	\$300	\$300
Skilled Nursing Care Facility, Per day up to the number of days for hospital confinement	\$75	\$100	\$100	\$150
Skin Cancer Initial Diagnosis one per lifetime	\$300	\$300	\$400	\$600
Supportive/Protective Care Drugs/Colony Stimulating Factors, per day <i>Maximum per calendar year</i>	\$50 \$400	\$100 \$800	\$150 \$1,200	\$200 \$1,600
Surgical Procedures, per unit <i>Maximum per procedure</i>	\$40 \$2,500	\$50 \$3,000	\$60 \$5,000	\$70 \$6,000
Transportation, per mile <i>Maximum per round trip</i>	\$0.50 \$1,000	\$0.50 \$1,000	\$0.50 \$1,200	\$0.50 \$1,500
Additional Benefits	Level 1	Level 2	Level 3	Level 4
Bone Marrow Donor Screening <i>Maximum of one per lifetime</i>	\$50	\$50	\$50	\$50
Cancer Vaccine Benefit <i>Maximum of one per lifetime</i>	\$50	\$50	\$50	\$50
Waiver of Premium	Yes	Yes	Yes	Yes

Applicable to FL

Cancer Assist PS01956

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Wellness Benefit – Employer Option

Part 1: Cancer Wellness/Health Screening

As the employer you will choose whether to include the Cancer Wellness/Health Screening Benefit. If selected, you will also choose one of four benefit amounts: \$25, \$50, \$75 or \$100. We will pay a benefit if any covered person incurs a charge and has one of the following tests listed below performed after the waiting period and while the policy is in force. This benefit is payable once per covered person per calendar year. The covered tests include:

Cancer Wellness tests:

- Bone marrow testing
- Breast ultrasound
- CA 15-3 (blood test for breast cancer)
- CA 125 (blood test for ovarian cancer)
- CEA (blood test for colon cancer)
- Chest x-ray
- Colonoscopy
- Flexible sigmoidoscopy
- Hemoccult stool analysis
- Mammography
- Pap smear
- PSA (blood test for prostate cancer)
- Serum protein electrophoresis (blood test for myeloma)
- Skin biopsy
- Thermography
- ThinPrep pap test
- Virtual colonoscopy

Health Screening tests:

- Blood test for triglycerides
- Carotid Doppler
- Echocardiogram (ECHO)
- Electrocardiogram (EKG, ECG)
- Fasting blood glucose test
- Serum cholesterol test to determine level of HDL and LDL
- Stress test on a bicycle or treadmill

Part 2: Cancer Wellness - Additional Invasive Diagnostic Test or Surgical Procedure

We will pay an additional benefit if any covered person incurs a charge for an additional invasive diagnostic test or surgical procedure performed by a physician after the waiting period. This benefit matches the Part 1 benefit amount.

We will pay this benefit only after an abnormal result from one of the covered Cancer Wellness tests in Part 1 has determined that an additional invasive diagnostic test or surgical procedure is necessary. We will pay a Part 2 benefit regardless of the results of the test(s). This benefit is payable once per covered person per calendar year.

Available Riders – Employee Options

Initial Diagnosis of Cancer Rider

If an insured or a covered family member is diagnosed with cancer after the waiting period, he/she will receive the initial diagnosis benefit purchased.

- Amount available: \$1,000 - \$10,000 in \$1,000 increments
- If family coverage, benefit for dependent children will be 2.5 times the amount for named insured
- We will pay this benefit once per lifetime for each covered person insured by the rider

Initial Diagnosis of Cancer Progressive Payment Rider

This rider provides a benefit when any covered person incurs a charge and receives an initial diagnosis of cancer. The Initial Diagnosis of Cancer Progressive Payment benefit will be paid for each month the rider has been in force after the waiting period and before the diagnosis of cancer is made.

- Accumulates \$50 per month while it is in force after the waiting period
- Colonial Life will pay this benefit only once for each person insured by the rider

Specified Disease Hospital Confinement Rider

- Colonial Life will pay \$300 each day a covered person incurs a charge and is confined to a hospital for treatment of a specified disease diagnosed after the waiting period.
- We will pay up to a maximum of \$150,000 during each covered person's lifetime for hospital confinements related to the treatment of the covered specified diseases.
- A covered specified disease, for purposes of the rider, means one of the following:

<ul style="list-style-type: none"> ▪ Adrenal Hypofunction (Addison's Disease) ▪ Botulism ▪ Bubonic Plague ▪ Cerebral Palsy ▪ Cholera ▪ Cystic Fibrosis ▪ Diphtheria ▪ Encephalitis (including Encephalitis contracted from West Nile Virus) ▪ Huntington's Chorea ▪ Legionnaires' Disease ▪ Lou Gehrig's Disease (Amyotrophic Lateral Sclerosis) ▪ Lyme Disease ▪ Malaria ▪ Meningitis (bacterial) ▪ Multiple Sclerosis ▪ Muscular Dystrophy ▪ Myasthenia Gravis 	<ul style="list-style-type: none"> ▪ Necrotizing Fasciitis ▪ Osteomyelitis ▪ Poliomyelitis ▪ Rabies ▪ Reye's Syndrome ▪ Scleroderma ▪ Scarlet Fever ▪ Sickle Cell Anemia ▪ Systemic Lupus ▪ Tetanus ▪ Toxic Epidermal Necrolysis ▪ Toxic Shock Syndrome ▪ Tuberculosis (Mycobacterial) ▪ Tularemia ▪ Typhoid Fever ▪ Variant Creutzfeldt-Jakob Disease (Mad Cow Disease) ▪ Yellow Fever
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Underwriting

- Fully underwritten for all prospective insureds
- Internal cancer health question
- AIDS/HIV health question

Eligibility Requirements

- Full-time, permanent employees working a minimum of 17.5 hours per week
- Employees and spouses issue age of 17 through 75. The Initial Diagnosis of Cancer Progressive Payment Rider issue ages are 17-64
- Actively at work and not disabled at the time of application
- Dependent Child(ren) - (As defined in the policy)

If employees apply for insured and spouse or two-parent family coverage and are not eligible because of health reasons, but a spouse is eligible, we can issue coverage to the eligible spouse through the employee's payroll deduction plan. The spouse becomes the named insured.

Participation Requirements

To offer this plan, we require only 3 enrolled employees.

Premium Information

Premiums are composite, which means that only one set of rates applies, regardless of age or risk.

Definitions

Waiting Period: Waiting Period means the first 30 days following the policy effective date during which no benefits are payable. The waiting period applies to all benefits and all riders. If cancer or a specified disease is diagnosed before the end of the waiting period, that cancer or specified disease will not be covered until the policy has been in force for two years, unless the cancer or specified disease is excluded by name or specific description in the policy.

What is Not Covered

We will not pay benefits for cancer or skin cancer:

- if the diagnosis or treatment of cancer is received outside of the territorial limits of the United States and its possessions; or
- for other conditions or diseases, except losses due directly from cancer.



Critical Illness 1.0

Colonial Life's individual Specified Critical Illness 1.0 insurance helps your employees and their families maintain financial security during the lengthy, expensive recovery period of a critical illness. It provides a lump sum benefit to help with the out-of-pocket medical and non-medical expenses of employees who suffer a critical illness.

Benefits are paid directly to the covered person unless they specify otherwise.

As the employer, you may choose *one* of the following plan types to offer to your employees.

- Critical Illness with Subsequent Diagnosis
- Critical Illness with Subsequent Diagnosis and Health Screening

An employee can choose to add cancer as a covered condition for additional premium.

Coverage is available to: Employee; Spouse (as the named insured); Employee and Spouse; Employee and Dependent Children; Spouse and Dependent Children; and Employee, Spouse and Dependent Children.

Face amounts for the employee range from \$5,000 - \$100,000 (amounts greater than \$75,000 require underwriting approval), in \$1,000 increments. Spouse coverage (as a named insured) is available in face amounts from \$5,000 to \$40,000. If a spouse is covered under the employee's plan, their face amount is 50% of the employee's coverage. If dependent child(ren) are covered, their face amount is 25% of the named insured's coverage.

Benefits

Critical Illness with Subsequent Diagnosis

Benefits are paid as a lump-sum payment for the following specified critical illness when the covered person is diagnosed:

100% of face amount per covered person

- Heart Attack (Myocardial Infarction)
- Stroke
- Major Organ Failure
- End Stage Renal (Kidney) Failure
- Cancer (if selected by Employee)
- Permanent Paralysis due to a Covered Accident
- Coma
- Blindness
- Occupational Infectious HIV or Occupational Infectious Hepatitis B, C or D

25% of face amount per covered person

- Coronary Artery Bypass Graft Surgery
- Carcinoma in Situ (if selected by Employee)

Proposal applicable to FL

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Subsequent Diagnosis –

Employees can use this coverage more than once.

- If a covered person receives a benefit for a Specified Critical Illness and is later diagnosed with:
 - a *different* condition, this product will pay the percentage of the face amount shown in the Benefits Section above up to the Maximum Benefit Amount payable.
 - the *same* condition, this product will pay 25% of the face amount up to the Maximum Benefit Amount payable. (*Critical illnesses that do not qualify are: Cancer, Carcinoma in Situ, Coronary Artery Bypass Graft Surgery, Occupational Infectious HIV and Occupational Infectious Hepatitis B, C or D.*)
 - Dates of diagnoses of Specified Critical Illnesses must be separated by at least 180 days.
- The Maximum Benefit Amount for the policy is three times the face amount for the named insured for all covered persons combined. The Face Amount(s) will reduce by 50% on the first Policy Anniversary Date after the named insured attains age 75.

Wellness (Health Screening Benefit) – if selected by the Employer

\$50 payable once per year per covered person for 24 health screening tests such as:

- Stress test on a bicycle or treadmill
- Serum cholesterol test to determine levels of HDL and LDL
- Carotid doppler
- Electrocardiogram (ECG/EKG)
- Echocardiogram (ECHO)
- Chest x-ray
- Colonoscopy
- Mammography
- Pap smear
- PSA (blood test for prostate cancer)

Cancer Vaccine Benefit (if Cancer coverage is selected by the Employee)

- \$50 payable once per covered person per lifetime if a covered person incurs a charge for and receives any cancer vaccine approved by the FDA for the prevention of cancer.

Features

- This product allows you to provide additional benefits at no direct cost to you to help you attract and keep top talent.
- Coverage is portable – an employee can continue their coverage if they change jobs or retire.
- Benefits are paid in addition to other insurance your employees may have with other insurance companies.
- Benefits may be used however the covered person chooses. Typical uses include:
 - Out-of-pocket medical and non-medical expenses
 - Home health care needs/home modifications
 - Recovery and rehabilitation
 - Child care or caregiver expenses
 - Travel expenses to and from treatment centers

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Eligibility Requirements

- Issue ages 17-70 for both the employee and spouse.
- The employee is actively working at least 20 hours per week.
- The employee must be actively at work at the time of application.
- Dependent children (as defined in the policy).

Participation Requirements

To offer this plan, we require only three eligible applicants.

Please see **Underwriting section for additional information.**

Premium Information

Premiums are based on plan type chosen, age, and tobacco status.

Sample Monthly Premiums (Employee only)

\$25,000 face amount with Subsequent Diagnosis

Critical Illness			Crit Ill + Hlth Screening		
Issue Age	Non-tobacco	Tobacco	Issue Age	Non-tobacco	Tobacco
17-24	\$2.25	\$4.00	17-24	\$4.40	\$6.15
25-29	\$3.50	\$6.25	25-29	\$5.65	\$8.40
30-34	\$5.50	\$10.00	30-34	\$7.65	\$12.15
35-39	\$8.75	\$15.50	35-39	\$10.90	\$17.65
40-44	\$13.00	\$23.00	40-44	\$15.15	\$25.15
45-49	\$18.50	\$32.75	45-49	\$20.65	\$34.90
50-54	\$25.00	\$44.50	50-54	\$27.15	\$46.65
55-59	\$31.75	\$56.50	55-59	\$33.90	\$58.65
60-64	\$40.00	\$71.25	60-64	\$42.15	\$73.40
65-70	\$49.25	\$87.50	65-70	\$51.40	\$89.65
Critical Illness + Cancer			Crit Ill + Hlth Screening + Cancer		
Issue Age	Non-tobacco	Tobacco	Issue Age	Non-tobacco	Tobacco
17-24	\$4.00	\$7.00	17-24	\$6.15	\$9.15
25-29	\$6.25	\$11.00	25-29	\$8.40	\$13.15
30-34	\$10.25	\$18.50	30-34	\$12.40	\$20.65
35-39	\$16.25	\$29.00	35-39	\$18.40	\$31.15
40-44	\$25.00	\$44.50	40-44	\$27.15	\$46.65
45-49	\$36.25	\$64.75	45-49	\$38.40	\$66.90
50-54	\$52.00	\$92.50	50-54	\$54.15	\$94.65
55-59	\$67.00	\$119.50	55-59	\$69.15	\$121.65
60-64	\$86.50	\$154.25	60-64	\$88.65	\$156.40
65-70	\$105.50	\$188.00	65-70	\$107.65	\$190.15

Definition

Pre-existing Condition means having a sickness or physical condition that during the 12 months immediately preceding the Policy Coverage Effective Date of this policy had manifested itself in such a manner as would cause an ordinarily prudent person to seek medical advice,

Proposal applicable to FL

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diagnosis, care, or treatment or for which medical advice, diagnosis, care, or treatment was recommended or received.

What is Not Covered

We will not pay benefits for a Specified Critical Illness that occurs as a result of a covered person's:

- Felonies or Illegal Occupations
- Intoxicants or Narcotics
- Pre-existing Conditions -We will not pay a benefit for a pre-existing condition that occurs during the 12 month period after the Coverage Effective Date for this policy.
- Suicide or Self-Inflicted Injuries
- War or Armed Conflict

The above list does not include a complete description of each limitation and exclusion. To obtain a complete description, please refer to an outline of coverage, sample policy, or see your Colonial Life benefits counselor.

Proposal applicable to FL

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Individual Dental PPO

Dental coverage is one of the most valued workplace benefits because of its importance to the overall well-being of employees. When surveyed, 68% of employees said that they consider dental insurance a must-have¹.

Colonial Life's Individual Dental PPO covers a wide range of treatments, from routine cleanings to root canals and pays benefits based on a defined co-insurance percentage. With this coverage, employees have the freedom to choose any dentist, but when they see an in-network dentist they can receive discount on services which reduce their out-of-pocket costs.

¹MetLife, Annual U.S. Employee Benefit Trends Study, 2017, metlife.com

Dental Plan Overview

- Five PPO plan options; employer may offer a maximum of two plans to an account
- Coverage options include: Individual, Individual + Spouse, Individual + Children, and Individual + Family
- Immediate, 100% coverage on preventive services from any in-network dentist
- No waiting periods on preventive or basic services like fillings and simple extractions
- Nationwide dental network with more than 323,000 access points. Use an in-network dentist to avoid balance billing and receive network savings

Plan Options	Policy Year Maximum per Covered Person	Preventive (Class A)	Basic (Class B)	Major (Class C)
Plan 1/MAC	\$1,000	100%	60%	40%
Plan 2/MAC	\$1,000	100%	80%	50%
Plan 3/MAC	\$1,500	100%	80%	50%
Plan 4/MAC	\$2,000	100%	80%	50%
Plan 5/ Passive PPO	\$1,500	100%	80%	50%

*MAC stands for Maximum Allowable Charge; PPO stands for Preferred Provider Organization

- Class C Services: subject to a 12-month waiting period. Waiting periods may be waived if takeover is approved.
- Deductible: \$50 per person per policy year. (Applies to Class B & C; up to 3 per family)
- Plan levels vary by co-insurance levels, annual maximums, and benefit design
- Freedom to choose any dentist. When visiting an in-network provider, insureds will only be responsible for their co-insurance portion. Out-of-network benefits are paid based on whether the plan is a MAC plan or a passive PPO plan.

Applicable to AL, AR, AZ, CA, CO, DC, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, ME, MI, MN, MT, NC, ND, NE, NH, NV, OH, OK, OR, PA, SC, SD, TX, UT, VA, WI, WV, WY PS02572

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Out-of-Network Benefits

Plans 1-4 (MAC)

- Out-of-Network benefits will be paid based on the lesser of the dentist's actual charge or the in-network negotiated rate for a specific geographic area.
- Employees will be billed for any remaining amount up to the billed charge.
- The MAC reimbursement option drives more participants to in-network dentists, lowers claims costs, and reduces the overall cost of the plan.

Plan 5 (Passive PPO)

- Out-of-Network benefits are paid based on the Maximum Allowable Charge which is the lesser of the dentist's actual charge or the customary charge in a specific geographical area. Customary charge set at the 90th percentile.
- The majority of the time, out-of-network dentists will charge more for services than in-network dentists.
- Based on the Maximum Allowable Charge, Passive PPO plans typically pay more for out-of-network benefits than MAC plans.
- This plan is best suited for employees in geographical areas which lack the adequate presence of network dentists.

Employer Optional Benefits – If selected, applies to all in an account

Orthodontia Benefits (Class D)

- Pays 50% co-insurance for treatment involving a covered orthodontic procedure
- \$1,000 lifetime maximum per covered dependent child up to age 19
- 12-month waiting period. Waiting periods may be waived if takeover is approved
- If selected, will apply to all Individual + Children and Individual + Family policies only

Rollover Benefit

- Allows members to rollover unused portions of their annual maximum benefit to future years
- Each member must have one cleaning, one regular exam, and total dental claims paid during the year below the threshold limit
- If all three criteria are met, a portion of the annual maximum will rollover to the next year, increasing the next year's annual maximum

Available Riders – Employee Choice Options

Vision Rider

- Fully-insured vision benefits with coverage for eye exams and materials
- Maximum of one benefit for eye exam and one benefit for vision correction materials per covered person per benefit year
- The materials co-pay will cover the purchase of lenses with generous allowances for frames or contact lenses
- There are no brand restrictions for frames or contacts

Applicable to AL, AR, AZ, CA, CO, DC, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, ME, MI, MN, MT, NC, ND, NE, NH, NV, OH, OK, OR, PA, SC, SD, TX, UT, VA, WI, WV, WY PS02572

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Nationwide Dental and Vision Networks

- **Large Dental network** with freedom of choice: You can find a dentist in our national PPO network, which has more than 323,000 access points, and you can choose any dentist you want – in-network or out-of-network
- **Large Vision network** with more than 40,000 access points, that includes independent professionals and retail stores like Walmart, Target, Costco, Pearle Vision America's Best and more
- **When members stay in-network**, your dentist or eye care professional's office will file claims on their behalf

Additional Dental and Vision Features

- **Rate Stability** – Guaranteed renewable rates that won't change on an annual basis due to group claims experiences. Rates are filed with the states and can only change if we change rates for all policies issued in a state
- **Guaranteed Issue with no participation requirements** – GI for one enrolled with no minimum participation requirements. All eligible employees, ages 17 to 74, qualify for coverage without underwriting
- **Takeover** – Ability to waive Class C and Class D waiting periods and replace the existing dental carrier
- **Guaranteed Renewability** – Employees can keep the same coverage up to age 75 at the same rates if they change jobs or retire
- **Range of choices** – Choose from 5 distinct plan designs to provide a comprehensive dental product to employees
- **Focus on Wellness** – Plans cover regular checkups and cleanings at 100% with no deductible
- **Optional Vision Rider Available** – Employees may purchase a vision rider to receive benefits for annual eyes exams and contact lenses or eyeglasses (lenses and frames)

Underwriting

- Coverage is guaranteed issue for all eligible employees.
- To offer this plan, we require at least one enrolled. No minimum participation requirements.
- Takeover is available. If replacing another dental carrier's plan, waiting periods can be waived for those employees who had prior coverage. Underwriting approval is required.

Employee Eligibility Requirements

- Employees are working a minimum of 20 hours per week
- Employees meet the issue age requirements of 17 through 74 (up to age 75). May vary by state
- Employees are actively at work at the time of application

Applicable to AL, AR, AZ, CA, CO, DC, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, ME, MI, MN, MT, NC, ND, NE, NH, NV, OH, OK, OR, PA, SC, SD, TX, UT, VA, WI, WV, WY PS02572

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Individual Accident

Our Accident insurance is an indemnity plan providing employees and their families with injury, hospital, doctor, accidental death and catastrophic accident benefits in the event of a covered accident. These benefits can help with the out-of-pocket medical and non-medical expenses associated with an accident.

Product Features

- Composite Rates—premiums are composite, which means all eligible applicants in an account have the same rate basis, regardless of risk class or age
- Coverage is available for Guaranteed Issue
- Employees can choose whether they want individual or family coverage
- Benefits are paid directly to the insured unless specified otherwise
- No coordination of benefits—benefits are paid in addition to other insurance your employees may have
- Benefit amounts are the same for employee, spouse and dependent children, except for lower amounts for accidental death benefits for children
- Coverage is portable—employees can take this coverage with them at the same rates if they change jobs or leave your employment
- Policy is guaranteed renewable for life as long as premiums are paid when they are due within the grace period.
- Coverage available for: Employee Only; Spouse Only; Child Only; Employee and Spouse; One-Parent Family(Employee); One-Parent Family(Spouse); Two-Parent Family (Employee, Spouse and Dependent Children)

Available Plans

Coverage Options:

- Basic
- Preferred
- Premier

Either On/Off Job or Off-Job only accident coverage is available for the account based on employer choice.

Optional Employer Benefits:

- Active Lifestyles
- Non-fatal Gunshot Wound
- Wellbeing Assistance—Basic
- Wellbeing Assistance—Standard

Optional Employee Riders:

- Accident Disability Rider
- Accident/ Sickness Disability Rider
- Sickness Hospital Confinement Rider
- Sickness Hospital Confinement + Sickness Hospital Admission Rider
- Specified Critical Illness Rider



Accident Coverage Benefits

Colonial Life pays these benefits once per covered person for each covered accident unless otherwise noted.

Accident Benefits	Basic	Preferred	Premier
Accident Emergency Treatment • No calendar year maximum.	\$125	\$150	\$175
Accident Follow-Up Treatment (including Transportation) / Telemedicine • 6 visits per person per accident • 12 visits per person per calendar year	\$45	\$55	\$75
Accidental Death	\$25,000 EE/SP; \$5,000 CH	\$40,000 EE/SP; \$10,000 CH	\$50,000 EE/SP; \$15,000 CH
Accidental Death: Common Carrier	\$100,000 EE/SP; \$15,000 CH	\$160,000 EE/SP; \$30,000 CH	\$200,000 EE/SP; \$45,000 CH
Accidental Dismemberment: Loss of Use Finger/Toe	(1)\$750;(2+)\$1,500	(1)\$1,050;(2+)\$2,100	(1)\$1,500;(2+)\$3,000
Loss of Use/Paralysis of Hand/Arm/Foot/Leg	(1)\$10,000;(2+)\$20,000	(1)\$12,500;(2+)\$25,000	(1)\$17,500;(2+)\$35,000
Accidental Dismemberment due to Catastrophic Accident	\$12,500	\$30,000	\$30,000
Accidental Injury due to Automobile Accident	\$250	\$250	\$250
Ambulance—Air	\$1,600	\$2,400	\$2,800
Ambulance—Ground or Water	\$200	\$250	\$350
Blood/Plasma/Platelets	\$400	\$400	\$600
Burns, based on size and degree	2 nd Degree 36% of body: \$1,000 3 rd Degree 9sq”–18sq” : \$2,000 >18sq”–35sq” : \$4,000 Over 35 sq” : \$12,000	2 nd Degree 36% of body: \$1,000 3 rd Degree 9sq”–18sq” : \$2,500 >18sq”–35sq” : \$5,000 Over 35 sq” : \$15,000	2 nd Degree 36% of body: \$2,500 3 rd Degree 9sq”–18sq” : \$3,500 >18sq”–35sq” : \$7,000 Over 35 sq” : \$21,000
Burns—Skin Graft	50% of burn benefit	50% of burn benefit	50% of burn benefit
Coma (duration of at least 7 consecutive days)	\$12,500	\$15,000	\$17,500
Concussion	\$100	\$200	\$250
Dislocation (Based on joint and if repaired by open or closed reduction)	\$100–\$4,500	\$125–\$5,500	\$150–\$6,000
Emergency Dental Work	\$200 (crown, implant or denture) or \$50 (extraction)	\$350 (crown, implant or denture) or \$125 (extraction)	\$750 (crown, implant or denture) or \$250 (extraction)
Eye Injury	\$250	\$350	\$500
Fracture (based on bone and if repaired by open or closed reduction)	\$275–\$6,000	\$300–\$7,500	\$350–\$9,500
Hearing Loss—per ear	\$140	\$140	\$140
Hospital Admission	\$1,250	\$1,250	\$1,750
Hospital Confinement-Daily	\$250/day, up to 365 days	\$300/day, up to 365 days	\$350/day, up to 365 days
Hospital Sub-Acute Intensive Care Unit—Daily	\$350/day, up to 30 days	\$400/day, up to 30 days	\$500/day, up to 30 days
Hospital ICU Admission	\$1,750	\$2,500	\$3,000
Hospital ICU Confinement-Daily	\$450/day, up to 15 days	\$550/day, up to 15 days	\$600/day, up to 15 days
Knee Cartilage—Torn	\$600	\$800	\$950

Applicable to FL

PS02481

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Accident Benefits	Basic	Preferred	Premier
Laceration (based on size and repair)	No Stitches: \$30 With stitches less than 2": \$50 2'-6": \$300 greater than 6": \$625	No Stitches: \$30 With stitches less than 2": \$100 2'-6": \$350 greater than 6": \$750	No Stitches: \$30 With stitches less than 2": \$125 2'-6": \$375 greater than 6": \$750
Lodging (Companion) (per day up to 30 days)	\$125	\$150	\$175
Medical Equipment (formerly Appliances)			
Tier 1 Arm sling, Cane, Medical Ring Cushion, Neck Brace, or Wrist/Ankle Splint	\$40	\$40	\$40
Tier 2 Bedside Commode, Cold Therapy System (Cryotherapy), Crutches, Leg Brace, Shower Chair, Walker or Walking Boot	\$100	\$125	\$175
Tier 3 Back Brace, Body Jacket, Continuous Passive Movement (CPM), Electric Scooter, Halo, Hospital Bed (including rental), Knee Scooter, Stair Lift Chair or Wheelchair	\$200	\$250	\$350
Medical Imaging Study (limit one per covered person per calendar year)	\$200	\$250	\$300
Observation Room Benefit —Up to 2 days per person/calendar year	\$175	\$175	\$175
Pain Management (Epidural Anesthesia)	\$125	\$125	\$175
Post Traumatic Stress Disorder	\$250	\$250	\$250
Prosthetic Device/Artificial Limb	\$600 (1); \$1,200 (2+)	\$950 (1); \$1,900 (2+)	\$1,250 (1); \$2,500 (2+)
Prosthetic Device/ Artificial Limb Repair or Replacement	Replacement:\$600 Repair: \$300	Replacement:\$950 Repair: \$475	Replacement: \$1,250 Repair: \$625
Rehabilitation Unit Confinement per day. 15 days per accident, 30 days per calendar year	\$125	\$175	\$250
Ruptured Disc with Surgical Repair	\$600	\$950	\$1,550
Surgery—Cranial, Open Abdominal, Thoracic	\$1,200	\$1,900	\$2,000
Surgery—Hernia	\$225	\$250	\$300
Surgery—Exploratory and Arthroscopic	\$250	\$350	\$400
Tendon/Ligament/Rotator Cuff	\$600 (1) \$1,200 (2+)	\$800 (1) \$1,600 (2+)	\$950 (1) \$1,900 (2+)
Therapy—Occupational, Physical or Speech Therapy (per day, up to 10 days)	\$30	\$45	\$60
Transportation (per trip, up to 3 trips per accident)	\$500	\$700	\$900
X-Ray Benefit	\$40	\$40	\$50

Optional Employer-Selected Benefits

The following optional benefits are available for the employer to include in the plan design. These benefits are not optional for the employee.

Active Lifestyles Benefit

If you include this benefit, the base plan will provide a 20% benefit boost to each of the following benefits*:

- Concussion
- Dislocation
- Emergency Dental Work
- Eye Injuries
- Fractures
- Knee Cartilage—Torn
- Laceration
- Medical Imaging Study
- Ruptured Disc with Surgical Repair
- Surgery—Cranial, Open Abdominal, Thoracic/Hernia
- Surgery—Exploratory and Arthroscopic
- Tendon/Ligament/Rotator Cuff
- X-Ray

*The only qualification required is that any covered person under the policy was in a covered accident.

Non-Fatal Gunshot Wound Benefit

This benefit provides benefits for a non-fatal accident gunshot wound that is the result of a covered accident.

Plan Structure	On/Off-Job
Benefit Amount	\$1,000 or \$5,000 lump sum.
Benefit features	<ul style="list-style-type: none"> • Non-fatal gunshot wound from a conventional firearm. • One benefit per 24 hour period, regardless of the number of gunshot wounds. • Requires treatment by a doctor, including overnight care in a hospital, within 24 hours after the accident.

Wellbeing Assistance Benefit (Standard or Basic):

Wellbeing Assistance—Standard:	Wellbeing Assistance—Basic:
<ul style="list-style-type: none"> ○ Available amounts of \$50 or \$100. ○ Payable for each covered person on a policy once per calendar year. ○ Applies to 24 tests. ○ Benefit is subject to a 30-day waiting period. 	<ul style="list-style-type: none"> ○ Available amounts of \$50 or \$100. ○ Payable one per policy per calendar year. ○ Applies to 26 tests, including annual physicals and immunizations. ○ Benefit is subject to a 30-day waiting period.

Tests include:

- Annual Physical*
- Blood test for triglycerides
- Bone marrow testing
- Breast ultrasound
- Carotid Doppler
- CA 15-3 (blood test for breast cancer)
- CA 125 (blood test for ovarian cancer)
- CEA (blood test for colon cancer)
- Chest x-ray
- Colonoscopy
- Electrocardiogram (EKG, ECG)
- Echocardiogram (ECHO)
- Fasting blood glucose
- Flexible sigmoidoscopy
- Hemocult stool analysis
- Immunizations*
- Mammography
- Pap smear
- PSA (blood test for prostate cancer)
- Serum protein electrophoresis (blood test for myeloma)
- Serum cholesterol test for HDL and LDL
- Skin cancer biopsy
- Stress test on a bicycle or treadmill
- Thermography
- ThinPrep pap test
- Virtual colonoscopy

**Only available for the Wellbeing Assistance-Basic Benefit*

Optional Riders

Available for additional purchase, to provide extra coverage and benefits.

Off-Job Only or On/Off-Job Accident Disability Income Rider

- Employee or spouse
- \$400–\$2,500 Off-Job monthly benefit. On-job amount is 50% of Off-Job benefit.
- Sold in \$50 on-job and \$100 off-job increments
- Up to 50% of income for employee or spouse
- Guaranteed Renewable to age 75
- 0, 7, 14 or 30 day elimination period
- 6 or 12 month benefit period

Off-Job Only or On/Off-Job Accident/Sickness Disability Income Rider

- Employee or spouse
- \$400–\$2,500 Off-Job monthly benefit. On-job amount is 50% of Off-Job benefit.
- Sold in \$50 on-job and \$100 off-job increments
- Up to 50% of income for employee or spouse
- A 12/12 pre-existing condition limitation
- Guaranteed renewable to age 75

Elimination Periods	
Accident/Sickness Days	Available Benefit Period(s)
0/7, 7/7, 0/14, 14/14	3 months
0/7, 7/7, 0/14, 14/14, 0/30, 30/30	6 months
0/7, 7/7, 0/14, 14/14, 0/30, 30/30, 60/60, 90/90	12 months

Sickness Hospital Confinement Rider

- Pays if an insured is confined as an overnight resident bed patient in a hospital because of covered sickness
- \$100 per day
- 0-day elimination period
- 30-day benefit period
- 12/12 pre-existing conditions limitation
- Guaranteed renewable for life
- Available to employee, spouse and children

Sickness Hospital Confinement Rider + Sickness Hospital Admission Rider

- Choice of a \$200 or \$400 Sickness Hospital Admission Benefit amount
- Pays if an insured is confined as an overnight resident bed patient in a hospital because of covered sickness
- \$100 per day
- 0-day elimination period
- 30-day benefit period
- 12/12 pre-existing conditions limitation
- Guaranteed renewable for life
- Available to employee, spouse and children

Specified Critical Illness Rider

- Available benefit amounts of \$2,500 or \$5,000
- Payable for Heart Attack (Myocardial Infarction), Stroke and End Stage Renal (Kidney) Failure
- An additional benefit payable for a subsequent diagnosis of a different specified critical illness that is payable at 100% of the benefit
- A subsequent diagnosis of the same critical illness is payable at 25%
- Additional specified critical illnesses are available for covered dependent children only: Cerebral Palsy, Cleft Lip or Cleft Palate, Cystic Fibrosis, Down Syndrome and Spina Bifida are payable once per lifetime
- Benefit amount will reduce by 50% on the first anniversary date after the named insured attains age 75
- Available to employee, spouse and children

Eligibility Requirements

Accident Base Plans

- Permanent benefit-eligible employees between the ages of 17–80, working 15 hours per week
- Employee's spouse between the ages of 17–80
- Child(ren) between the ages of 0–25*

Optional Riders

- Disability Income Riders: permanent benefit-eligible employees and spouses between the ages of 17–74, working 15 or more hours per week. Accident/ Sickness Disability Riders are age-banded: 17–49, 50–64 and 65–74.
- Sickness Hospital Confinement Rider, Sickness Hospital Confinement + Sickness Hospital Admission Rider and Specified Critical Illness Rider: permanent benefit eligible employees between the ages of 17–74. Spouse must be age 17–74. Child(ren) must be age 0–25.

Please see attached Underwriting document for Optional Rider(s) underwriting guidelines.

Participation Requirement

To offer this plan, we require a minimum of 3 enrolled eligible employees.

Definitions

Pre-existing Condition¹: means a sickness or physical condition, whether diagnosed or not that during the 12 months preceding the Rider Coverage Effective Date had manifested itself in such a manner as would cause an ordinarily prudent person to seek medical advice, diagnosis, care, or treatment or for which medical advice, diagnosis, care or treatment was recommended or received., Genetic information is not a pre-existing condition in the absence of a diagnosis of the condition related to such information.]

For riders: after the rider has been in force for the Pre-Existing Condition Limitation Period of 12 months shown on the Rider Schedule, we will pay the benefits as stated in the rider for any loss as a result of a pre-existing condition not excluded by name or specific description if the covered loss began after the Pre-Existing Condition Limitation Period.

Geographical Limitations²: If you become totally disabled as the result of a covered accident or a covered sickness while you are outside the covered geographical areas and you are totally disabled longer than the elimination period shown on the Rider Schedule, your maximum benefit period for total disability while outside the covered geographical areas will be limited to 60 days.

Covered geographical areas are less than 40 miles outside the territorial limits of the United States, Canada, Mexico, Puerto Rico, the Bahama Islands, the Virgin Islands, Bermuda or Jamaica.

Giving Birth Limitation³: Giving birth within the first nine (9) months after the rider coverage effective date shown on the Rider Schedule. Complications of pregnancy are subject to the Pre-Existing Condition Limitation Period shown on the Rider Schedule and are administered consistently with any other sickness.

¹Applicable to the Accident/Sickness Disability Rider, Specified Critical Illness Rider and the Sickness Hospital Confinement Riders.

²Applicable to the Accident/Sickness Disability Rider and the Accident Disability Riders.

³Applicable to the Accident/Sickness Disability Rider and the Sickness Hospital Confinement Riders.

What is Not Covered

Accident Coverage Plans will not provide benefits for losses that are caused by, contributed to by or occur as a result of a covered person's:

- Felonies or Illegal Occupations
- Hazardous Avocations
- Racing
- Semi-Professional or Professional Sports
- Sickness
- Suicide or Injuries Which Any Covered Person Intentionally Does to Himself
- War or Armed Conflict

In addition to the exclusions listed above, we also will not pay the **Accidental Dismemberment due to Catastrophic Accident benefit** for injuries that are caused by or are the result of:

- Birth
- Intoxicants and narcotics



In addition to the base plan exclusions listed above, the **Accident Disability Rider** will not provide benefits for losses that are caused by, contributed to by or occurs as a result of a covered person's:

- Cosmetic Surgery
- Felonies or Illegal Occupations
- Flying
- Geographical Limitations
- Hazardous Avocations
- Intoxicants and Narcotics
- Mental or Nervous Disorders Racing
- Semi-Professional or Professional Sports
- Sickness
- Substance Abuse
- Suicide or Injuries Which You Intentionally Do to Yourself
- War or Armed Conflict

In addition to the base plan exclusions listed above, the **Accident Sickness Disability Rider** will not provide benefits for losses that are caused by, contributed to by or occurs as a result of a covered person's:

- Cosmetic Surgery
- Felonies or Illegal Occupations
- Flying
- Geographical Limitations
- Giving Birth Limitation
- Hazardous Avocations
- Intoxicants and Narcotics
- Pre-Existing Condition Limitation
- Mental or Nervous Disorders Racing
- Semi-Professional or Professional Sports
- Substance Abuse
- Suicide or Injuries Which You Intentionally Do to Yourself
- War or Armed Conflict

In addition to the base plan exclusions listed above, the **Sickness Hospital Confinement Rider** will not provide benefits for losses that are caused by, contributed to by or occurs as a result of a covered person's:

- Accidental Injuries
- Alcoholism or Drug Addiction
- Dental Procedures
- Elective Procedures and Cosmetic Surgery
- Felonies or Illegal Occupations
- Giving Birth Limitation
- Pre-Existing Condition Limitation
- Mental or Nervous Disorders Suicide or Injuries Which Any Covered Person Intentionally Does to Himself
- War or Armed Conflict
- Well Baby Care

In addition to the base plan exclusions listed above, the **Specified Critical Illness Rider** will not provide benefits for losses that are caused by, contributed to by or occurs as a result of a covered person's:

- Alcoholism or Drug Addiction
- Felonies or Illegal Occupations
- Intoxicants and Narcotics
- Pre-Existing Condition Limitation
- Mental or Nervous Disorders Suicide or Injuries Which Any Covered Person Intentionally Does to Himself
- War or Armed Conflict

Underwriting Guidelines

Guaranteed Issue

- Available during all enrollments and for new hires during the new hire eligibility period
- Coverage is guaranteed issue with no health questions. Simplified Issue health questions apply to Accident/Sickness Disability Rider.
- The Pre-existing Condition Limitation only applies to these riders: Accident Sickness Disability Rider, Specified Critical Illness Rider, and Sickness Hospital Confinement Rider.

Premium Information

- Premiums are composite for all ages, with specific issue ages
- Coverage available for: Employee Only; Spouse Only; Child Only; Employee and Spouse; One-Parent Family(Employee); One-Parent Family(Spouse); Two-Parent Family (Employee, Spouse and Dependent Children)

Sample Monthly Premiums				
Coverage Type	Plan	Optional Employer Benefits	Optional Employee Riders	Monthly Premium
Employee Only Spouse Only OR Child Only	Basic Off-Job Only			\$8.75
Employee Only	Preferred On/Off-Job	Wellbeing Assistance –Basic \$50	Sickness Hospital Confinement	\$22.76
Employee/ Spouse	Premier On/Off-Job		Spouse Off-Job Accident Only Disability (17-74) 0-day Elimination Period 6 month Benefit Period \$400	\$33.21
Two-Parent Family	Preferred Off-Job Only	Wellbeing Assistance – Standard \$50 Gunshot Wound \$1,000	Critical Illness \$5,000 (Age 17-49)	\$45.60



INDIVIDUAL DISABILITY

Colonial Life's voluntary short-term disability insurance policy is an individual plan that is sold via payroll deduction at the workplace. It insures your employee's paycheck by replacing a portion of your employee's income if he becomes disabled because of a covered accidental injury or covered sickness.

PRODUCT FEATURES

- **Guarantee Issue** – Available for up to \$4,000 in monthly benefits for up to 60% of income. Additional monthly benefits up to \$6,500 are available.
- **Total Disability Benefits** and disability benefits if working and unable to perform the material and substantial duties of your occupation.
- **Optional Employer-Selected Benefits** are available.
- **Renewability** - This policy is guaranteed renewable to age 75. Premiums can be changed only if we change them on all policies of this kind in the state where the policy is issued.
- **No Integration** - There is no coordination of benefits at claim with other coverages. Benefits are paid regardless of benefits received from other sources. For benefit amounts over \$4,000 per month, offsetting occurs during the application process.
- **Level Premiums** - Rates are based on issue age and are level, not step-rated.
- **Geographical Limitations (Worldwide Coverage)** – Geographical Limitations provision allows coverage for disabilities that occur outside the regularly covered geographical areas for up to 60 days.
- **Waiver of Premium** - available after 90 consecutive days of a covered disability.
- **Benefits are paid directly** to the insured unless they specify otherwise.
- **Coverage is portable** - An employee may continue this coverage if he changes jobs or leaves your company, with no evidence of insurability required.

AVAILABLE PLANS

This policy offers two base Individual Disability plan choices:

- Off-Job Accident/Off-Job Sickness Disability benefits
- On/Off-Job Accident/ On/Off-Job Sickness Disability benefits

The employer also has the option of including:

- First Day Hospital Benefit (Waiver of Elimination Period for First Day of Hospital Confinement Benefit.)
- Mental or Nervous Disorders Benefit (24 month lifetime maximum)

Applicable to FL

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DISABILITY BENEFITS

As the employer, you can make several choices to tailor the plan design for your employees.

<p>Plan Structure</p>	<ul style="list-style-type: none"> • Off-Job Accident and Off-Job Sickness • On/Off-Job Accident / On/Off-Job Sickness <p>Please note that the on-job benefit is 50% of the off job benefit. The employer may choose to offer the Off-Job plan, the On/Off-Job plan or both plans in the account.</p>
<p>Benefit Amount</p>	<p>\$400 to \$6,500 (offered in \$100 increments)</p> <p>Up to 60% of income for coverage amounts from \$400 to \$6,500.</p> <p>The employer may choose a lower maximum benefit amount and/or lower maximum income replacement.</p>
<p>Benefit Periods</p>	<p>The employer can choose a maximum of two benefit periods.</p> <ul style="list-style-type: none"> • 3 months • 6 months • 12 months • 24 months
<p>Elimination Periods</p>	<p>0/7, 7/7, 7/14, 0/14, 14/14, 0/30, 30/30 60/60, 90/90, and 180/180</p> <p>Choice of elimination periods based on benefit periods selected. The employer may consider limiting the number of elimination period choices to best fit needs and for ease of enrollment.</p> <p>Elimination period means a period of total disability during which no benefits are payable. The first number represents accident elimination period /the second number represents sickness elimination period.</p> <p>If \$4,100 to \$6,500 in monthly benefits is selected, a 3, 6, 12 or 24 month benefit period with a 14/14, 30/30, 60/60, 90/90 or 180/180 elimination period is available.</p>
<p>Additional Disability Benefits Riders</p>	<p>The Additional Disability Benefit Rider provides policyholders the ability to purchase additional disability coverage on a guarantee issue basis after their initial enrollment.</p> <p>Policyholders can purchase a maximum of two riders, at two separate intervals. Each rider is available for one or two disability units (\$100 or \$200/monthly).</p> <p><i>Rider coverage, when combined with the base plan may not exceed up to 60% and up to \$4,000 in monthly benefits. For amounts greater than \$4,000, standard underwriting guidelines apply.</i></p>

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OPTIONAL EMPLOYER-SELECTED BENEFITS

As the employer, you can also include optional benefits to tailor the plan design for your employees. If one or both optional employer benefits are selected then all Individual Disability policies in the account will include the benefit(s).

Waiver of Elimination Period for First Day of Hospital Confinement Benefit (First Day Hospital)

This benefit waives the elimination period, or a portion of it, if the insured is hospitalized for a covered disability and he has an elimination period of 30 days or less.

- Disability benefits will begin on the earlier of the first day of hospital confinement or the first day after the elimination period.
- Elimination periods of greater than 30 days may be offered in the account, but those plans will not include this benefit.

Mental or Nervous Disorders Benefit

This benefit pays the monthly disability benefits when an insured is disabled due to a mental or nervous disorder.

- The Mental or Nervous Disorders exclusion will be waived and is removed from the contract.
- The 3 month plan will provide benefits up to 3 months per occurrence for Mental or Nervous Disorders. The 6, 12 and 24 month plans can provide benefits up to 6 months per occurrence for Mental or Nervous Disorders.
- The lifetime cumulative maximum is 24 months of Mental or Nervous Disorders benefits.

OPTIONAL EMPLOYEE-SELECTED BENEFITS

As the employer, you can also include an optional benefit that the employee can choose at the point-of-sale if an insured would like to purchase.

Health Screening Rider

- \$50 per calendar year for one of 24 health screening tests
- 30 day waiting period
- Rider is guaranteed renewable to age 75

PREMIUM INFORMATION

- Issue age-banded, one risk class and unisex. Age bands of 17-49, 50-64 and 65-74.
- Premiums are based on the account's industry risk classification and optional employer benefits.
- Premiums rates are based on issue age and are level, not step-rated. Premiums do not increase because the policyholder ages.

PARTICIPATION REQUIREMENTS

To offer this plan, we require 3 eligible employees and a minimum of 1 enrolled eligible employee. Certain underwriting levels have separate participation requirements.

ELIGIBILITY REQUIREMENTS

- Offered to all permanent, benefit-eligible employees age 17-74 who work at least 20 hours per week on a regular basis.
- The employee must be actively at work at the time of application.
- Seasonal and temporary employees are not eligible. Spouses and children are not eligible.

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UNDERWRITING

Guarantee Issue (GI) *For accounts with 100+ eligible employees*

Guarantee Issue allows employees to purchase Colonial Life Disability coverage without having to answer health questions.

- Colonial Life will issue coverage on a Guarantee Issue basis during the initial enrollment if the greater of 5 lives or 15% participation is met, and for new hires.
- Guarantee Issue is available up to 60% of income for up to \$4,000 in monthly benefits.
- Short Term Disability is the primary product presented during your enrollment.
- No more than 4 Colonial Life insurance products are presented during your enrollment.
- Our benefit representatives will be provided access to your employees through individual enrollment sessions.
- Employees must be actively at work and there must be a defined enrollment period.
- For amounts in excess of the Guarantee Issue limits, specifically when an employee applies for \$4,100 - \$6,500 in monthly benefits, Guarantee Issue is not available and health questions will apply. If the applicant does not qualify for these higher benefit levels, we can Guarantee Issue a lower amount (up to 60% of income, up to \$4,000).
- Pre-existing conditions limitation may apply.
- For accounts with 250+ lives, Underwriting Risk Manager approval is required.

Post Enrollment Guarantee Issue (PEGI) *For accounts with 5+ eligible employees*

Post Enrollment Guarantee Issue requires each applicant to answer eligibility and three health questions. If participation is met, then we will guarantee issue policy coverage to all applicants regardless of health. If participation is not met, eligibility and health question information will be evaluated based on underwriting guidelines.

- PEGI is up to 60% of income for up to \$4,000 in monthly benefits.
- Meet a greater of 3 enrolled lives or 10% participation requirement with our short-term disability plan.
- Employees must be actively at work and there must be a defined enrollment period.
- If 10% of your employees participate during the initial enrollment, we will continue to offer Post Enrollment Guarantee Issue to new hires.
- For amounts in excess of the Post Enrollment Guarantee Issue limits, specifically when an employee applies for \$4,100 - \$6,500 in monthly benefits, guarantee issue is not available and additional health questions will apply. If the applicant does not qualify for these higher benefit levels, we can guarantee issue a lower amount (up to 60% of income, up to \$4,000) if the account meets the participation guideline.
- Pre-existing conditions limitation may apply.

Standard Issue (SI) *For accounts with 3+ benefit eligible employees*

- Benefit amounts up to 60% of income for up to \$4,000 in monthly benefits. Each applicant will be asked eligibility and three health questions.
- Benefit amounts for \$4,100 - \$6,500 in monthly benefits, and additional health questions will apply.
- Pre-existing conditions limitation may apply.

Applicable to FL

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DEFINITIONS

Total Disability means you are unable to perform the material and substantial duties of your occupation and under the regular and appropriate care of a physician.

If applicable, after the first 12 months of disability, **Totally Disabled or Total Disability** means you are:

- unable to perform the material and substantial duties of your occupation;
- not, in fact, working at any occupation for which you are fitted by education, training and experience; and
- under the regular and appropriate care of a physician.

We will pay 50% of the monthly benefit amount shown on the Policy Schedule if you are working for pay or benefits during the first 12 months of your being totally disabled, or during the benefit period shown on the Policy Schedule, if less.

Waiver of Premium Benefit After you have been totally disabled as the result of a covered accident or covered sickness for more than 90 consecutive days (while the policy is in force), or after the elimination period shown in your policy schedule (whichever is greater), we will waive the premium for the policy and any attached riders for as long as you remain disabled. The premium will be waived up to the maximum benefit period shown in your policy schedule.

You must pay all premiums to keep the policy and any attached riders in force until you have been totally disabled for 90 consecutive days while the policy is in force, or for the elimination period shown on the policy schedule, whichever is greater.

There is no limit to the number of times you can receive the Waiver of Premium benefit. This Waiver of Premium benefit does not apply to any period that you are totally due to an accident or sickness which is excluded by name or specific description in the policy.

Geographical Limitations (Worldwide Coverage) If you become totally disabled as the result of a covered accident or a covered sickness while outside the covered geographical areas, the Geographical Limitations provision may allow us to provide benefits. You must be totally disabled longer than the elimination period shown in the policy schedule, and the maximum benefit period for total disability while outside the covered geographical areas will be limited to 60 days. Covered geographical areas are less than 40 miles outside the territorial limits of the United States, Canada, Mexico, Puerto Rico, the Bahama Islands, the Virgin Islands, Bermuda, or Jamaica. After the 60 day period, benefits will not be paid until you return to the covered geographical areas.

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WHAT IS NOT COVERED

Pre-existing Condition means a sickness or physical condition, whether diagnosed or not, that during the 12 months preceding the Policy Coverage Effective Date had manifested itself in such a manner as would cause an ordinarily prudent person to seek medical advice, diagnosis, care or treatment or for which medical advice, diagnosis, care or treatment was recommended or received.

Genetic information is not a pre-existing condition in the absence of a diagnosis of the condition related to such information.

After the policy has been in force for 12 months from the Policy Coverage Effective Date shown on the Policy Schedule, we will pay benefits for any pre-existing condition not excluded by name or specific description if the covered disability began at least 12 months after the Policy Coverage Effective Date and the elimination period has been satisfied.

Any recurrent disability caused by a pre-existing condition will not be covered if it is treated as a continuation of the previous disability.

General Exclusions and Limitations

- Cosmetic Surgery
- Felonies or Illegal Occupations
- Flying
- Giving Birth: Giving birth within the first nine months after the coverage effective date of the policy as the result of a normal pregnancy, including Cesarean. Complications of pregnancy are subject to the Pre-Existing Condition Limitation Period shown on the policy schedule and are administered consistently with any other sickness.
- Hazardous Avocations
- Intoxicants and Narcotics
- Pre-Existing Conditions
- Mental or Nervous Disorders (*If employer optional benefit is selected, this exclusion will be removed.*)
- Racing
- Semi-professional or Professional Sports
- Substance Abuse
- Suicide or Injuries Which You Intentionally Do to Yourself
- War or Armed Conflict

The above list does not include a complete description of each limitation and exclusion. To obtain a complete description of benefits, limitations and exclusions, please refer to a sample policy or see your Colonial Life representative. This information is only intended for proposal use with employers.

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Individual Medical BridgeSM Benefits - Plan 2

Plan 2: Hospital Confinement, Observation Room, Rehabilitation Unit Confinement, Waiver of Premium and Outpatient Surgical Procedure

	Benefits Included
Hospital Confinement	✓
Observation Room	✓
Rehabilitation Unit Confinement	✓
Waiver of Premium	✓
Outpatient Surgical Procedure	✓

Plan 2 Benefits

Hospital Confinement*: Eight levels from \$500-\$5,000. The level(s) selected by you as the employer is paid once per covered person per calendar year. You can choose up to two levels of hospital confinement. The levels can't be separated by more than \$1,000. (For example, \$1,000 and \$2,000 are acceptable; \$1,000 and \$2,500 are not.)

Level 1: \$500	Level 3: \$1,500	Level 5: \$2,500	Level 7: \$4,000
Level 2: \$1,000	Level 4: \$2,000	Level 6: \$3,000	Level 8: \$5,000

- Levels 7 and 8 require underwriting approval.
- Healthcare, Education and Local and City Government accounts are eligible for Hospital Confinement Levels 1-3 (\$500-\$1,500) only.
- State and Federal Government are eligible for Level 1 and 2 (\$500 and \$1,000) only.

Observation Room

- Payable for treatment in an observation room in a hospital for less than 20 hours.
- Pays \$100 per visit, up to a maximum of two visits per covered person per calendar year.

Rehabilitation Unit Confinement *

- Inpatient rehabilitation immediately following hospital confinement either in a unit that is part of a hospital or in a free-standing facility.
- Pays \$100 per day up to 15 days per period of confinement to a rehabilitation unit.
- Calendar maximum of 30 days per covered person.

Waiver of Premium

- After 30 continuous days of a covered hospital confinement or rehabilitation unit confinement of the named insured.
- Waives premium for the entire policy and any applicable riders.

Applicable to FL

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Outpatient Surgical Procedure Benefit*: As the employer, you will choose one of the Outpatient Surgery options below. There is a limit of one option per account. Each option contains two tiers of benefits and a calendar year maximum payable per covered person per calendar year.

Outpatient Surgical Procedure	Option 1	Option 2	Option 3
Tier 1	\$500	\$750	\$1,500
Tier 2	\$1,000	\$1,500	\$3,000
Calendar Year Maximum	\$1,500	\$2,500	\$4,500

Optional Employer Choice Benefits

- **Health Screening**
 - \$50 or \$100 benefit amount selected by employer.
 - Payable once per covered person per calendar year.
 - Subject to a 30-day waiting period.

- **Medical Treatment Package**
 - Air Ambulance
 - \$1,000 per benefit.
 - Maximum of one benefit per covered person per calendar year.
 - Ambulance
 - \$100 per benefit.
 - Maximum of one benefit per covered person per calendar year.
 - Appliance
 - \$100 per benefit.
 - Maximum of one benefit per covered person per calendar year.
 - Doctor's Office Visit
 - \$25 per visit.
 - Maximum of three visits per calendar year for named insured only coverage; maximum of five visits per calendar year for all covered persons combined for family coverage.
 - Emergency Room Visit
 - \$100 per visit.
 - Maximum of two visits per covered person per calendar year.
 - X-Ray
 - \$25 per benefit.
 - Maximum of two benefits per covered person per calendar year.



Optional Employee Choice Benefit Riders

- **Daily Hospital Confinement***
 - \$100 per covered person per day of hospital confinement.
 - Maximum of 365 days per confinement.

- **Enhanced Intensive Care Unit Confinement***
 - \$500 per covered person per day of intensive care unit confinement.
 - Maximum of 30 days per covered person per confinement.

**The pre-existing condition limitation is applicable to these benefits.*

Sample Rates

Individual Medical BridgeSM
Plan 2
Hospital Confinement, Observation Room, Rehabilitation Unit Confinement, Waiver of Premium
Outpatient Surgical Procedure – Option 1
Monthly Premiums – Age Banded Rates
Named Insured

	Hospital Confinement - \$1,000 Medical Treatment Package \$50 Health Screening Option 1 (Tier 1 \$500, Tier 2 \$1,000, Calendar Year Max \$1,500)
Ages 17-49	\$23.60
Ages 50-59	\$31.10
Ages 60-64	\$40.00
Ages 65-75	\$52.50



Term Life

Colonial Life’s Term Life insurance plan offers life insurance protection where the benefit remains the same through the life of the policy. At the end of the term period selected by the employee (10-, 15-, 20-, or 30-years), the policy may be continued on a yearly renewable basis, without proof of good health.

The same benefit amounts are available for employees and spouses. Spouse and children’s term riders are also available.

Benefits

There are four plan options that may be available, depending on the applicant’s age and the term period selected. The spouse term life policy is available whether or not the employee buys a policy.

Base Plan Benefits	<ul style="list-style-type: none"> ▪ Four plan options (employee and spouse): <ul style="list-style-type: none"> 10-year level term: \$10,000-unlimited max, based on underwriting 15-year level term: \$10,000-unlimited max, based on underwriting 20-year level term: \$10,000-unlimited max, based on underwriting 30-year level term: \$10,000-unlimited max, based on underwriting ▪ Each option provides the same benefit payout throughout the duration of the policy. ▪ Tobacco-distinct/unisex rates for face amounts up to \$250,000. ▪ Tobacco-distinct/gender-distinct rates for face amounts over \$250,000. ▪ Guaranteed premiums that do not increase during the selected term and increase annually after the initial guaranteed period ends without proof of good health. ▪ Full or partial conversion to a cash value life policy. ▪ Flexibility to keep the policy if the employee changes jobs or retires. <p>Terminal Illness Accelerated Death Benefit</p> <ul style="list-style-type: none"> ▪ Automatically included at no additional charge on all policies. ▪ Allows policyowner to receive an advance of up to 75% of policy’s face amount, not to exceed \$150,000 if the insured is diagnosed with a terminal illness. ▪ Minimum payout allowed is \$7,500.
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Features

- Premium savings for face amounts over \$250,000 based on health; payable only by bank draft.
- Affordable high-face amount term insurance can help address business continuity needs for a company owner or key employee to prevent disruptions in business due to death.
- Living benefits – options for a Chronic Care Accelerated Death Benefit Rider and Critical Illness Accelerated Death Benefit Rider gives access to the death benefit while the insured is still living.
- Option to convert all or a portion of term benefit amount to a cash value life policy (through age 75) without proof of good health.
- Guaranteed renewable to age 95, as long as premiums are paid when due.

Optional Riders

Employee optional riders are available and can be purchased at an additional cost to provide extra coverage and benefits.

Children's Term Rider

- Covers all eligible dependent children for one level premium.
- Face amounts: \$1,000 to \$20,000.
- Coverage is guaranteed issue (no health questions asked).
- May convert to a cash value life policy for up to five times the rider amount (maximum of \$50,000).
- Can be added to either the employee or spouse policy, but not both.
- If the primary insured dies while the rider is in force, a paid-up term policy is provided to each covered child equal to the face amount of the existing Children's Term Rider at no cost until age 25.

Spouse Term Rider (on employee policy only)

- 10-year Spouse Term Rider: \$10,000-\$50,000 (Available with 10-, 15-, 20-, or 30-year term employee policy only).
- 20-year Spouse Term Rider: \$10,000-\$50,000 (Available with 20- or 30-year term employee policy only).
- Spouse signature is not required.
- May convert to a cash value life policy if the base policy terminates, the rider terminates, or the insured and spouse legally divorce.

Applicable to AK, AL, AR, AZ, CO, CT, DC, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NE, NH, NJ, NM, NV, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, VT, WA, WI, WV, WY.

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Accidental Death Benefit Rider

- Provides an additional benefit in the event the insured dies as a direct result of accidental bodily injury before age 70.
- Rider amount equals the base policy's face amount, up to a maximum of \$150,000.
- The benefit amount doubles if the injury occurs while the insured is a fare-paying passenger using public transportation, including taxis or ridesharing.
- An additional seatbelt benefit is also included.
- May be purchased on an employee or spouse term life policy.

Chronic Care Accelerated Death Benefit Rider

- Allows all or a portion of the death benefit to be advanced in monthly payments or a one-time lump sum payment if the proposed insured has been certified with a chronic illness while the rider is in force and after the elimination period.
- Claim payments are:
 - Monthly, 6% of the death benefit; or
 - A one-time lump sum of 50% of the death benefit
- Chronic illness means the insured requires substantial supervision due to a severe cognitive impairment or the inability to perform at least two of the six Activities of Daily Living (bathing, continence, dressing, eating, toileting, and transferring) for a period of at least 90 days.
- Premiums are waived during the benefit period.
- May be purchased on an employee or spouse term life policy.

Critical Illness Accelerated Death Benefit Rider

- Advances \$5,000 of the death benefit if diagnosed with a critical illness and the date of diagnosis is while the rider is in force.
- Maximum of one benefit for an initial diagnosis of:
 - Heart Attack (Myocardial Infarction)
 - Stroke
 - End Stage Renal (Kidney) Failure
- A subsequent diagnosis benefit is included.
- May be purchased on an employee or spouse term life policy.

Waiver of Premium Benefit Rider

- Waives all premiums due on the policy and riders if the insured becomes totally disabled before the policy anniversary following the insured's 65th birthday and satisfies the six-month elimination period.
- Available on a spouse policy only with coverage at the full underwriting level.

Applicable to AK, AL, AR, AZ, CO, CT, DC, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NE, NH, NJ, NM, NV, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, VT, WA, WI, WV, WY.

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Eligibility Requirements

Employee Policy

- Must be actively working on a full-time basis (20+ hours per week), or not disabled or unable to work, at the time of application.
- Employed with present employer for at least 90 days.
- Issue ages:
 - 10-year, 16-75
 - 15-year, 16-70
 - 20-year, 16-65
 - 30-year, 16-50

Spouse Policy

- Must be actively working, or not disabled or unable to work, at the time of application.
- A spouse can apply for a policy even if the employee does not apply for a Term Life policy.
- Must be the spouse of an employee as defined in the policy.
- Issue ages:
 - 10-year, 16-75
 - 15-year, 16-70
 - 20-year, 16-65
 - 30-year, 16-50

Spouse Term Rider

- Must be actively working, or not disabled or unable to work, at the time of application.
- Must be the spouse of an employee.
- Available only on employee policies.
- Issue ages:
 - 10-year, 16-65
 - 20-year, 16-50

Children's Term Rider

- Can be purchased on an employee or spouse policy, but not both.
- On the day Colonial Life issues the rider, the insured child must be:
 - At least 14 days of age;
 - Living with the insured in a regular parent-child relationship and dependent on them for support and maintenance; and
 - Under the age of 19.
- Issue ages: dependent children, 14 days-18 years.
- Issue ages: employee or spouse, 16-65.

Accidental Death Benefit Rider

- Available to employee and spouse at original issue only.
- Issue ages: employee or spouse, 16-65.

Applicable to AK, AL, AR, AZ, CO, CT, DC, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NE, NH, NJ, NM, NV, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, VT, WA, WI, WV, WY.

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Chronic Care Accelerated Death Benefit Rider

- Available to employee and spouse at original issue only.
- Issue ages same as the base plan.
- Two additional health questions are required to qualify for this rider.

Critical Illness Accelerated Death Benefit Rider

- Available to employee and spouse at original issue only.
- Issue ages same as the base plan.

Waiver of Premium Rider

- Available to employee and spouse at original issue only.
- Issue ages: employee or spouse, 16-55.

Participation Requirements

To offer this plan, we require only three eligible participants apply.

Premium Information

- Premiums are guaranteed level for the term period selected and increase annually after the selected initial guaranteed period ends.
- Unisex, tobacco-distinct rates for all riders and policies with face amounts up to \$250,000.
- Gender-distinct rates for face amounts over \$250,000.
- Non-tobacco standard, preferred and preferred plus rates available based on the applicant's health for face amounts over \$250,000.
- Tobacco/non-tobacco rates for employee and spouse policies.

What Is Not Covered

If the insured dies by suicide, whether sane or insane, within two years (one year in ND) from the coverage effective date or the date of reinstatement, we will not pay the death benefit. We will terminate the policy and return the premiums paid, without interest.

Applicable to AK, AL, AR, AZ, CO, CT, DC, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NE, NH, NJ, NM, NV, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, VT, WA, WI, WV, WY.

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Whole Life

Colonial Life’s Whole Life insurance plan is individually owned, with guaranteed level premiums, guaranteed cash values and a guaranteed death benefit. Coverage is permanent and is guaranteed for the life of the policy (to age 100), provided premiums are paid when due.

Adult Base Plan Benefits

Two Plan Options	<p>Available for employee, spouse, and full-time dependent students ages 18-26</p> <ul style="list-style-type: none"> ▪ Paid-Up at Age 70 Plan The policy is paid-up at the original face amount when the insured reaches age 70, with no additional premiums due ▪ Paid-Up at Age 100 Plan The policy is paid-up at the original face amount when the insured reaches age 100, with no additional premiums due
Death Benefit	\$5,000 to \$500,000
Immediate Advance Claims Payment	Helps meet immediate needs with a payment of \$3,000 to the designated beneficiary upon certification of the insured’s death; the remainder of the claim will be processed and the balance provided to the designated beneficiary
Terminal Illness Accelerated Death Benefit	<ul style="list-style-type: none"> ▪ If the insured is diagnosed with a terminal illness and has a life expectancy of 12 months or less, the policyowner can request up to 75 percent of the death benefit, to a maximum of \$150,000 ▪ A \$200 one time administrative fee will be charged
Endows	The policy endows at age 100
Surrender Options	<ul style="list-style-type: none"> ▪ Cash Surrender – the policyowner can give up ownership of the policy in exchange for all of the policy’s accumulated cash value ▪ Extended Term Insurance Option – the policyowner can use the accumulated net cash surrender value as a net single premium to purchase term life insurance ▪ Reduced Paid-Up Life Insurance Option – the policyowner can use the accumulated net cash surrender value as a net single premium to purchase a smaller amount of fully paid-up life insurance

Applicable to AK, AL, AR, AZ, CO, CT, DC, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, MT, NC, ND, NE, NH, NJ, NM, NV, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, VT, WA, WI, WV and WY

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Juvenile Plan Benefits

Same as the adult plan, with these differences:

Coverage	Employees do not have to purchase coverage on themselves to purchase policies for their children or grandchildren Uni-tobacco rates for ages 0-17
Plan Design	Paid-Up at Age 70 Plan: The policy is paid-up at the original face amount when the insured reaches age 70, with no additional premiums due
Death Benefit	<ul style="list-style-type: none"> ▪ Minimum death benefit of \$10,000 ▪ Maximum death benefit of \$500,000
Built-in Guaranteed Purchase Option	<ul style="list-style-type: none"> ▪ Allows the policyowner the right to purchase additional amounts of insurance without providing evidence of insurability ▪ The option may be exercised at ages 18, 21, and 24 ▪ Additional amounts of insurance of the same plan may be purchased on each option date up to the initial face amount of the policy; the total amount for the exercised options cannot exceed \$100,000

Optional Riders

Policyowners may select to enhance their whole life policy by adding optional rider(s) at an additional premium.

Spouse Term Riders

Choice of 10-year or 20-year Spouse Term Riders

- Provides a level death benefit for the designated 10- or 20-year term period with guaranteed level premiums
- No spouse signature required
- Face amounts: \$5,000 - \$50,000
- Rates are level, uni-tobacco and unisex
- May not exceed face amount of base plan
- May convert to a cash value life policy if the base policy terminates, the rider terminates, or the insured and spouse legally divorce
- May be added to an employee base policy
- Can be added after purchase of the base plan

Children's Term Rider

- One premium provides level term coverage for all eligible dependent children of the primary insured
- Face amounts: \$1,000 - \$20,000, in \$1,000 increments
- Coverage is guaranteed issue (no health questions asked)
- Coverage is convertible without evidence of insurability to a cash value life insurance plan for up to five times the rider's face amount, not to exceed \$50,000
- If the main insured dies before the child is age 25, paid-up insurance will be provided for each child until the child's 25th birthday
- Can be added to either the employee or spouse policy, but not both
- Can be added after the purchase of the base plan

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Accidental Death Benefit Rider

- Benefit equal to the death benefit of the policy, not to exceed \$150,000
- Pays an additional death benefit if the primary insured dies as a result of an accidental bodily injury before age 70
- Benefit amount doubles if the accidental bodily injury occurs while the insured is a fare-paying passenger using public transportation, including taxis or ridesharing
- An additional 25 percent of the accidental death benefit will be paid if the insured dies due to an accidental bodily injury sustained while driving or riding in a private passenger vehicle and wearing a seatbelt
- Can be added to employee, spouse, dependent student or juvenile policies
- Can be added after the purchase of the base plan

Chronic Care Accelerated Death Benefit Rider

Allows all or a portion of the death benefit to be advanced in monthly payments or a one time lump sum payment if the proposed insured has been certified with a chronic illness while the rider is in force; no benefits are payable during the 90-day elimination period

- Claim payments are:
 - Monthly, 6% of the death benefit; or
 - A one-time lump sum of 50% of the death benefit
- Chronic illness means the insured requires substantial supervision due to a severe cognitive impairment or the inability to perform at least two of the Activities of Daily Living (bathing, continence, dressing, eating, toileting, and transferring) for a period of at least 90 days
- Premiums are waived during the benefit period
- May be purchased on an employee or spouse policy
- Can be added after the purchase of the base plan

Critical Illness Accelerated Death Benefit Rider

- Advances \$5,000 of the death benefit if diagnosed with a critical illness and the date of diagnosis is while the rider is in force
- Maximum of one benefit for an initial diagnosis of:
 - Heart Attack (Myocardial Infarction)
 - Stroke
 - End Stage Renal (Kidney) Failure
- A subsequent diagnosis benefit is included
- May be purchased on an employee or spouse policy
- Can be added after the purchase of the base plan

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Guaranteed Purchase Option Rider

- Provides the policyowner the right to buy additional insurance on the life of the insured without providing evidence of insurability if the policy and rider are purchased before age 50
- There are three option dates to purchase additional insurance; the second, fifth and eighth policy anniversary dates. A life event option can be exchanged for an anniversary option
- Life event options are the date of the insured's marriage, birth of a living child, adoption of a child or a legal divorce
- Additional amounts of insurance of the same plan may be purchased on each option date up to the initial face amount not to exceed a total combined maximum of \$100,000 for all options
- May be purchased on an employee, spouse or dependent student policy
- Available only at purchase of base plan

Waiver of Premium Benefit Rider

- Waives the total premium if the insured is totally disabled due to an accidental bodily injury or sickness before age 65
- Must meet the elimination period of 6 months continuous total disability; Premiums paid during this period will be refunded when the claim is approved
- Terminates on the policy anniversary following the insured's 65th birthday
- Available on employee or spouse policies
- Available only at purchase of base plan

Features

- Individual whole life insurance plan that provides cash value protection with guarantees to individuals in the payroll deduction market
- Guaranteed level premiums, guaranteed cash value and a guaranteed death benefit
- Tax-free benefits are paid to the beneficiary, regardless of other life insurance and Social Security
- Family Coverage – available through a separate policy or term rider for the spouse and a separate policy or term rider for the dependent children
- \$3,000 immediate advance claims payment provides immediate funds to the designated beneficiary.
- Automatic Premium Loan – Colonial Life will lend the policyowner the amount needed to pay an overdue premium provided the cash surrender value is great enough to pay the premiums plus interest
- \$250 minimum loan available; No minimum loan amount in FL
- Portable Coverage – Insured can keep the policy if that person changes jobs or retires

Eligibility Requirements

Employee

- Must be actively working on a full-time basis (20+ hours per week) and actively at work on the date of the enrollment
- Employed with present employer for at least 90 days
- Paid-Up at Age 70 plan issue ages: 18-50
- Paid-Up at Age 100 plan issue ages: 18-79

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Spouse

- Must be actively working, or not disabled or unable to work, at the time of application
- A spouse can apply for a policy even if the employee does not apply for a Whole Life policy
- Spouse term rider only available on an employee policy
- Must be the spouse of an employee as defined in the policy
- Individual Policy
 - Paid-Up at Age 70 plan issue ages: 18-50
 - Paid-Up at Age 100 plan issue ages: 18-79
- 10-Year Spouse Term Rider
 - Available with both the Paid-Up at Age 70 plan and Paid-Up at Age 100 plan
 - Issue Ages: 18-65
- 20-Year Spouse Term Rider
 - Available with both the Paid-Up at Age 70 plan and Paid-Up at Age 100 plan
 - Issue Ages: 18-50

Dependent Child

- Individual Policy
 - Issue ages, 0-17
 - Full-time dependent students ages 18-26 are issued adult plans and the tobacco question is required on the application
- **Children's Term Rider**
 - Can be purchased on an employee or spouse policy, but not both
 - On the day Colonial Life issues the rider, the insured child must be:
 - At least 14 days of age;
Living with the insured in a regular parent-child relationship and dependent on them for support and maintenance; and
 - Under the age of 19
 - Issue ages: dependent children, 14 days-18 years
 - Issue ages: employee or spouse, 18-65

Accidental Death Benefit Rider

- Issue ages: employee, spouse or dependent student, 18-65
- Issue ages: dependent child, 0-17

Chronic Care Accelerated Death Benefit Rider

- Employee and spouse issue ages same as the base plan
- Two additional health questions are required to qualify for this rider

Critical Illness Accelerated Death Benefit Rider

- Employee and spouse issue ages same as the base plan

Guaranteed Purchase Option Rider

- Issue ages: employee or spouse, 18-50
- Issue ages: dependent student, 18-26

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Waiver of Premium Rider

- Issue ages: 18-55 for employee and spouse policies

Participation Requirements

To offer this plan, we require only 3 eligible applicants

Premium Information

Employee and Spouse Policy

- Level, unisex premiums
- Employee, spouse and dependent student policies are tobacco distinct
- Dependent students ages 18-26 are issued an adult plan
- Three rate bands based on age and face amount:

Issue Ages	Band 1		Band 2		Band 3
	Guaranteed Issue Employee only	Simplified Issue	Guaranteed Issue Employee only	Simplified Issue Level 1	Full Underwriting
	3-49 lives		50+ lives		
18-50	\$5,000-\$25,000	\$25,001-\$49,999	\$5,000-\$49,999	\$50,000-\$150,000	\$150,001-\$500,000
51-60	\$5,000-\$15,000	\$15,001-\$29,999	\$5,000-\$29,999	\$30,000-\$150,000	\$150,001-\$500,000
61-79	\$5,000-\$8,000	\$8,001-\$14,999	\$5,000-\$14,999	\$15,000-\$150,000	\$150,001-\$500,000

Juvenile Policy

- Level, unisex premiums
- Juvenile policies issued up to age 17 are uni-tobacco

What Is Not Covered

If the insured commits suicide, whether sane or insane, within two years (one year in ND) from the coverage effective date or the date of reinstatement, we will not pay the death benefit. We will terminate this policy and return the premiums paid, minus any loans and loan interest.

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A partnership you can trust

We want the same thing you do: a better benefits experience for you and your employees. By offering, technological solutions with dedicated service, we'll be there to help you every step of the way.

**We appreciate the opportunity to work with you
and look forward to hearing from you soon.**

Colonial Life is committed to protecting the financial health and wellness of America's employees and their families. Colonial Life compensates producers to facilitate the sale and delivery of these valuable benefits. This compensation might include commissions as well as various incentives and awards. We support disclosure of compensation programs for our benefit solutions, and your insurance advisor can provide you with complete information about these programs. You may also learn additional information about our compensation programs by contacting our Plan Administrator Service Center at 1-800-256-7004.



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