



## Voluntary Benefits Available!



### Cushion the Financial Hardship of an Accident, Critical Illness or Hospital Stay

Accidents and illnesses happen. Unfortunately, an unexpected health crisis can also include unexpected expenses and down time. We're pleased to offer **ENHANCED VOLUNTARY BENEFITS** from Unum that will provide a financial cushion when you or a family member has an accident, critical illness, or hospital stay. The coverage supplements your medical insurance, and best of all, pays a cash benefit that you can use however you choose.

These benefits are available in addition to your core benefits package. While you pay the full cost of coverage, the plans provide group pricing and convenient payroll deduction that are not available with individual policies.

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### Accident Insurance

Accident Insurance provides benefits for a wide range of common injuries such as fractures, dislocations, burns, and lacerations. If you or a covered family member suffers an accident, the plan will pay a lump sum, tax-free benefit based on the type of injury and the medical services received. You can use the benefit however you see fit— whether to pay for medical bills or to order a pizza because you aren't up for cooking with a broken arm!

View the [summary](#) included in this packet to learn more!

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### Critical Illness Insurance

Critical Illness Insurance can help fill a financial gap if you experience a serious illness such as cancer, heart attack or stroke. Upon diagnosis of a covered illness, the plan immediately pays you a lump sum, tax-free benefit. You can use the benefit however you decide.

View the [summary](#) included in this packet to learn more!

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## Hospital Indemnity Insurance

Even a minor trip to the hospital can be costly. You may have extra expenses like transportation, meals for family members, childcare, and time away from work. Hospital Indemnity Insurance enhances your current medical coverage by paying a lump sum, tax-free benefit for hospital admission and stays, including ICU. Use the benefit to pay medical bills, childcare, or for regular living expenses like groceries—you decide!

View the [summary](#) included in this packet to learn more!

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## Additional Value-Add Benefits Also Available

### *ARAG*

Legal insurance provides you with easy to use, cost effective legal services. It is designed to help you plan ahead in life, protect what's important, and be prepared for any unexpected legal matters

### *LifeLock ID Theft*

Identity Theft Protection proactively safeguards your identity, credit, and finances, while also providing full-service remediation to restore pre-theft identity.

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## What's Next?

- Enroll in voluntary benefits within 30 days of being eligible (i.e. new hire date or benefit-eligible transfer)!
  - Caregivers can **call 1-855-421-9449** for enrollment support!
  - Caregivers can **create an account and enroll** by visiting <http://boss.employeenavigator.com/>
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# Accident Insurance



## How does it work?

Accident Insurance pays a set benefit amount based on the type of injury you have and the type of treatment you need. It covers accidents that occur off the job. And it includes a range of incidents, from common injuries to more serious events.

## Why is this coverage so valuable?

It can help you with out-of-pocket costs that your medical plan doesn't cover, like co-pays and deductibles. You'll have base coverage without medical underwriting. The cost is conveniently deducted from your paycheck. You can keep your coverage if you change jobs or retire. You'll be billed directly.

## Who can get coverage?

You	If you're actively at work*
Your spouse	Can get coverage as long as you have purchased coverage for yourself.
Your children	Dependent children from birth until their 26th birthday, regardless of marital or student status.

\*Employees must be legally authorized to work in the United States and actively working at a U.S. location to receive coverage. See Schedule of benefits for a complete listing of what is covered.

## How much does it cost?

Your monthly premium	Option 1
You	\$9.11
You and your spouse	\$15.58
You and your children	\$18.56
Family	\$25.03

## What's included?

### Organized Sports Benefit

Each family member that has Accident coverage is eligible for a 25% increase in payable benefits within the Injury and Treatment schedule of benefit categories. See disclosures and schedule of benefits for more information.

### Domestic Steerage

The plan provides enhanced Hospital benefits of 25% when you use hospitals owned, operated, or controlled by your employer. See schedule of benefits for more information.

## SCHEDULE OF BENEFITS

### Accidental Death and Dismemberment

AD&D	
Employee	\$75,000
Spouse	\$37,500
Children	\$18,750
Common Carrier Benefit can pay if the insured individual is injured as a fare-paying passenger on a common carrier (examples include mass transit trains, buses and planes)	
Employee	\$75,000
Spouse	\$37,500
Children	\$18,750
Dismemberment	
Both Feet	\$75,000
Both Hands	\$75,000
One Foot	\$37,500
One Hand	\$37,500
Thumb and Index Finger of the same Hand	\$18,750
Coma	
Coma	\$15,000
Home & Vehicle Modifications	
Home & Vehicle Modifications	\$1,750
Loss of Use	
Hearing (one ear)	\$18,000
Hearing	\$37,500
Sight of one Eye	\$37,500
Sight of both Eyes	\$75,000
Speech	\$37,500
Paralysis	
Uniplegia	\$18,750
Hemi/Paraplegia	\$37,500
Triplegia	\$56,250
Quadriplegia	\$75,000
<b>Hospitalization</b>	
Admission*	\$1,200
Daily Stay *	\$350
Daily Stay – Hospital ICU (added to Daily Stay)*	\$200
*Domestic Steerage	25%
<b>Injury</b>	
Injury due to felony & sexual assault	\$250
Organized Sports	25%
Burns	
2nd Degree Burns - At least 5%, but less than 20% of skin surface	\$1,000

### Injury

2nd Degree Burns - 20% or greater of skin surface	\$2,000
3rd Degree Burns - Less than 5% of skin surface	\$4,000
3rd Degree Burns - At least 5%, but less than 20% of skin surface	\$10,000
3rd Degree Burns - 20% or greater of skin surface	\$20,000
Concussion	
Concussion	\$200
Connective Tissue Damage	
One Connective Tissue (tendon, ligament, rotator cuff, muscle)	\$90
Two or more Connective Tissues (tendon, ligament, rotator cuff, muscle)	\$150
Dislocations	
Knee joint (other than patella)	\$3,000
Ankle bone or bones of the foot (other than toes)	\$3,000
Hip joint	\$6,000
Collarbone (sternoclavicular)	\$1,500
Elbow joint	\$900
Hand (other than Fingers)	\$900
Lower Jaw	\$900
Shoulder	\$900
Wrist joint	\$900
Collarbone (acromioclavicular and separation)	\$600
Finger or Toe (Digit)	\$300
Kneecap (patella)	\$900
Incomplete Dislocation - Payable as a % of the applicable Dislocations benefit	25%
Eye Injury	
Eye Injury	\$200
Fractures	
Skull (except bones of Face or Nose), Depressed	\$8,000
Hip or Thigh (femur)	\$6,000
Skull (except bones of Face or Nose), Non-depressed	\$4,000
Vertebrae, body of (other than Vertebral Processes)	\$2,400
Leg (mid to upper tibia or fibula)	\$2,400
Pelvis	\$2,400
Bones of the Face or Nose (other than Lower Jaw, Mandible or Upper Jaw, Maxilla)	\$1,200

### Injury

Upper Arm between Elbow and Shoulder (humerus)	\$1,200
Upper Jaw, Maxilla (other than alveolar process)	\$1,200
Ankle (lower tibia or fibula)	\$800
Collarbone (clavicle, sternum) or Shoulder Blade (scapula)	\$800
Foot or Heel (other than Toes)	\$800
Forearm (olecranon, radius, or ulna), Hand, or Wrist (other than Fingers)	\$800
Kneecap (patella)	\$800
Lower Jaw, Mandible (other than alveolar process)	\$800
Vertebral Processes	\$800
Rib	\$800
Tailbone (coccyx), Sacrum	\$800
Finger or Toe (Digit)	\$400
Chip Fracture - Payable as a % of the applicable Fractures benefit	25%
Same bone maximum incurred per accident	1 Fracture
Maximum payable multiplier for multiple bones	2 Times
Internal Injuries	
Internal Injuries	\$200
Lacerations	
No Repair	\$85
Repair Less than 2 inches	\$250
Repair At least 2 inches but less than 6 inches	\$500
Repair 6 inches or greater	\$1,000
Loss of a Digit	
One Digit (other than a Thumb or Big Toe)	\$1,250
One Digit (a Thumb or Big Toe)	\$1,875
Two or more Digits	\$2,500
Knee Cartilage	
Knee Cartilage (Meniscus) Injury	\$250
Ruptured or Herniated Disc	
One Disc	\$210
Two or more Discs	\$350
<b>Recovery</b>	
At-Home Care	\$100
Physician Follow-Up Visits	\$75
Physician Follow-Up Maximum Visits	2
Prescription Drug	\$25

## SCHEDULE OF BENEFITS

### Recovery

Prescription Benefit Incidence per covered accident	1 Per Insured
Rehabilitation or Subacute Rehabilitation Unit	\$100
Behavior Health Therapy	\$50
Behavior Health Therapy visits	15
Therapy Services (chiro, speech, PT, occ, acupuncture/alternative)	\$50
Therapy Services Maximum Days	15

### Surgery

Dislocations	
Dislocation, Surgical Repair - Payable as a % of the applicable Injury benefit	100%
Anesthesia	
Epidural or Regional Anesthesia	\$100
General Anesthesia	\$250
Connective Tissue	
Exploratory without Repair	\$100
Repair for One Connective Tissue	\$800
Repair for Two or more Connective Tissues	\$1,200
Eye Surgery	
Eye Surgery, Requiring Anesthesia	\$300
Fractures	
Fractures, Surgical Repair - Payable as a % of the applicable Injury benefit	100%
Surgical Repair same bone maximum incurred per accident	1 Fracture
Surgical Repair same bone maximum payable multiplier for multiple bones	2 Times
General Surgery	
Abdominal, Thoracic, or Cranial	\$1,500
Exploratory	\$150
Incidence per covered accident	1 Per Insured
Hernia Surgery	
Hernia Surgery	\$150
Knee Cartilage	
Knee Cartilage (Meniscus) Exploratory without Repair	\$150
Knee Cartilage (Meniscus) with Repair	\$750
Outpatient Surgical Facility	
Outpatient Surgical Facility	\$300

### Surgery

Ruptured or Herniated Disc Surgery	
Exploratory without Repair	\$125
One Disc	\$675
Two or more Discs	\$1,000

### Treatment

Organized Sports	25%
Ambulance	
Air	\$1,500
Ground	\$300
Durable Medical Equipment	
Tier 1 (arm sling, cane, medical ring cushion)	\$50
Tier 2 (bedside commode, cold therapy system, crutches)	\$100
Tier 3 (back brace, body jacket, continuous passive movement, electric scooter)	\$200
Emergency Dental Repair	
Dental Crown	\$350
Dental Extraction	\$115
Filling or Chip Repair	\$90
Imaging	
Tier 1: X-rays or Ultrasound	\$50
Tier 2: Bone Scan, CAT, CT, EEG, MR, MRA, or MRI	\$200
Medical Imaging Incidence allowance covered accident per Tier	1 Per Insured Per Tier
Lodging	
Lodging (per night)	\$150
Prosthetic Device	
One Device or Limb	\$750
Two or more Devices or Limbs	\$1,500
Skin Grafts	
For Burns - Payable as a % of the applicable Burn benefit	50%
Not Burns - Less than 20% of skin surface	\$250
Not Burns - 20% or greater of skin surface	\$500
Treatment	
Emergency Room Treatment	\$200
Injections to Prevent or Limit Infection (tetanus, rabies, antivenom, immune globulin)	\$50
Pain Management Injections (epidural, cortisone, steroid)	\$100
Transfusions	\$400
Transportation (per trip)	\$100

### Treatment

Family Care	\$50
Pet Boarding (per day)	\$30
Treatment in a Physician's Office or Urgent Care Facility (initial)	\$200

### Organized Sports Benefit

This increased benefit payment will be applied if the covered Accident occurs while playing an organized sport that required formal registration to participate and is officiated by someone certified to act in that capacity.

### Domestic Steerage

This enhanced benefit applies to Hospital Admission, Hospital Daily Stay, and ICU Daily Stay.

### Active employment

You are considered in active employment if, on the day you apply for coverage, you are being paid regularly for the required minimum number of hours per week based on your position and you are performing the material and substantial duties of your regular occupation. Insurance coverage will be delayed if you are not in active employment because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective. New employees are eligible for coverage on the first of the month following the date of active employment. Please contact your plan administrator to confirm your eligibility.

If enrolling, and eligible for Medicare (age 65+; or disabled) the Guide to Health Insurance for People with Medicare is available at [www.medicare.gov/sites/default/files/2022-03/02110-medigap-guide-health-insurance.pdf](http://www.medicare.gov/sites/default/files/2022-03/02110-medigap-guide-health-insurance.pdf).

### Effective date of coverage

Coverage becomes effective on the first day of the month in which payroll deductions begin.

### Exclusions and limitations

We will not pay benefits for a claim that is caused by, contributed to by, or resulting from any of the following:

- committing or attempting to commit a felony;
  - being engaged in an illegal occupation other willful criminal activity. "Willful criminal activity" includes, but is not limited to any of the following: (i) operating a vehicle while intoxicated in violation of Michigan's vehicle code, or any other act or law with similar intent; or (ii) operating a methamphetamine laboratory. "Willful criminal activity" does not include a civil infraction or other activity that does not rise to the level of a misdemeanor or felony;
  - participating in war or any act of war, whether declared or undeclared;
  - combat or training for combat while serving in the armed forces of any nation or authority, including the National Guard, or similar government organizations;
  - a Covered Loss that occurs while an Insured is legally incarcerated in a penal or correctional institution;
  - elective procedures, cosmetic surgery, or reconstructive surgery unless it is a result of organ donation, trauma, infection, or other diseases;
  - an occupational injury;
  - any Sickness, bodily infirmity, or other abnormal physical condition or Mental or Nervous Disorders, including diagnosis, treatment, or surgery for it;
  - infection. This exclusion does not apply when the infection is due directly to a cut or wound sustained in a Covered Accident;
  - experimental or investigational procedures;
  - operating any motorized vehicle while intoxicated;
  - operating, learning to operate, serving as a crew member of any aircraft or hot air balloon, including those which are not motor-driven, unless flying as a fare paying passenger;
  - jumping, parachuting, or falling from any aircraft or hot air balloon, including those which are not motor-driven;
  - travel or flight in any aircraft or hot air balloon, including those which are not motor-driven, if it is being used for testing or experimental purposes, used by or for any military authority, or used for travel beyond the earth's atmosphere;
  - practicing for or participating in any semi-professional or professional competitive athletic contests for which any type of compensation or remuneration is received;
  - riding or driving an air, land or water vehicle in a race, speed or endurance contest; and
  - engaging in hang-gliding, bungee jumping, sail gliding, parasailing, parakiting, or BASE jumping.
- Additionally, no benefits will be paid for a Covered Loss that occurs prior to the Coverage Effective Date.

### Termination of employee coverage

If you choose to cancel your coverage your coverage ends on the first of the month following the date you provide notification to your employer. Otherwise, your coverage ends on the earliest of the:

- the date this policy is canceled by Unum or your employer;
- the date you are no longer in an eligible group;
- the date your eligible group is no longer covered;
- the date of your death;
- the last day of the period any required premium contributions are made;
- the last day you are in active employment.

However, as long as premium is paid as required, coverage will continue

- in accordance with the Continuation of your Coverage during Absences provision; or
- if you elect to continue coverage for you, your Spouse, and Children under Portability of Accident Insurance.

We will provide coverage for a Payable Claim that occurs while you are covered under this certificate

### Accident Insurance

#### THIS IS A LIMITED BENEFITS POLICY

This information is not intended to be a complete description of the insurance coverage available. The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. For complete details of coverage and availability, please refer to certificate form GAC16-1 et al. and GAC16-2, GAC16-2-IL, GAC16-3-NH, GAC16-2-OH, and GAC16-2-UT. Policy Form GAP16-1 et al. in all states, GAP16-3-NH in New Hampshire or contact your Unum representative.

Unum complies with state civil union and domestic partner laws when applicable.

Underwritten by: Unum Insurance Company, Portland, Maine

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# Critical Illness Insurance



## How does it work?

If you're diagnosed with an illness that is covered by this insurance, you can receive a lump sum benefit payment. You can use the money however you want.

## Why is this coverage so valuable?

- The money can help you pay out-of-pocket medical expenses, like co-pays and deductibles.
- You can use this coverage more than once. Even after you receive a payout for one illness, you're still covered for the remaining conditions and for the reoccurrence of any critical illness with the exception of skin cancer. The reoccurrence benefit can pay 100% of your coverage amount. Diagnoses must be at least 180 days apart or the conditions can't be related to each other.

## What's covered?

Critical illnesses	
<ul style="list-style-type: none"> <li>• Heart attack</li> <li>• Stroke</li> <li>• Major organ failure</li> <li>• End-stage kidney failure</li> </ul>	<ul style="list-style-type: none"> <li>• Coronary artery disease Major (50%): Coronary artery bypass graft or valve replacement Minor (10%): Balloon angioplasty or stent placement</li> </ul>
Cancer conditions	
<ul style="list-style-type: none"> <li>• Invasive cancer — all breast cancer is considered invasive</li> </ul>	<ul style="list-style-type: none"> <li>• Non-invasive cancer (25%)</li> <li>• Skin cancer — \$500</li> </ul>
Progressive diseases	Supplemental conditions
<ul style="list-style-type: none"> <li>• Amyotrophic Lateral Sclerosis (ALS)</li> <li>• Dementia, including Alzheimer's disease</li> <li>• Multiple Sclerosis (MS)</li> <li>• Parkinson's disease</li> <li>• Functional loss</li> </ul>	<ul style="list-style-type: none"> <li>• Loss of sight, hearing or speech</li> <li>• Benign brain tumor</li> <li>• Coma</li> <li>• Permanent Paralysis</li> <li>• Occupational HIV, Hepatitis B, C or D</li> <li>• Infectious Diseases (25%)</li> </ul>

Please refer to the certificate for complete definitions about these covered conditions. Coverage may vary by state. See exclusions and limitations.

## Why should I buy coverage now?

- It's more affordable when you buy it through your employer and the premiums are conveniently deducted from your paycheck.
- Coverage is portable. You may take the coverage with you if you leave the company or retire. You'll be billed at home.

## Who can get coverage?

You:	Choose from \$10,000 to \$30,000 of coverage in increments of \$5,000 with no medical underwriting to qualify if you apply during this enrollment.
Your spouse:	Spouses can only get 50% of the employee coverage amount as long as you have purchased coverage for yourself.
Your children:	Children from live birth to age 26 are automatically covered at no extra cost. Their coverage amount is 50% of yours. They are covered for all the same illnesses plus these specific childhood conditions: cerebral palsy, cleft lip or palate, cystic fibrosis, Down syndrome and spina bifida. The diagnosis must occur after the child's coverage effective date.

Monthly costs		
Age	Employee coverage: \$10,000 Spouse coverage: \$5,000	
	Employee	Spouse
under 25	\$1.70	\$0.85
25 - 29	\$2.40	\$1.20
30 - 34	\$3.40	\$1.70
35 - 39	\$5.00	\$2.50
40 - 44	\$7.00	\$3.50
45 - 49	\$9.70	\$4.85
50 - 54	\$12.70	\$6.35
55 - 59	\$17.50	\$8.75
60 - 64	\$25.00	\$12.50
65 - 69	\$37.30	\$18.65
70 - 74	\$59.20	\$29.60
75 - 79	\$88.30	\$44.15
80 - 84	\$129.10	\$64.55
85+	\$209.00	\$104.50

Monthly costs		
Age	Employee coverage: \$30,000 Spouse coverage: \$15,000	
	Employee	Spouse
under 25	\$5.10	\$2.55
25 - 29	\$7.20	\$3.60
30 - 34	\$10.20	\$5.10
35 - 39	\$15.00	\$7.50
40 - 44	\$21.00	\$10.50
45 - 49	\$29.10	\$14.55
50 - 54	\$38.10	\$19.05
55 - 59	\$52.50	\$26.25
60 - 64	\$75.00	\$37.50
65 - 69	\$111.90	\$55.95
70 - 74	\$177.60	\$88.80
75 - 79	\$264.90	\$132.45
80 - 84	\$387.30	\$193.65
85+	\$627.00	\$313.50

Monthly costs		
Age	Employee coverage: \$20,000 Spouse coverage: \$10,000	
	Employee	Spouse
under 25	\$3.40	\$1.70
25 - 29	\$4.80	\$2.40
30 - 34	\$6.80	\$3.40
35 - 39	\$10.00	\$5.00
40 - 44	\$14.00	\$7.00
45 - 49	\$19.40	\$9.70
50 - 54	\$25.40	\$12.70
55 - 59	\$35.00	\$17.50
60 - 64	\$50.00	\$25.00
65 - 69	\$74.60	\$37.30
70 - 74	\$118.40	\$59.20
75 - 79	\$176.60	\$88.30
80 - 84	\$258.20	\$129.10
85+	\$418.00	\$209.00

Your paycheck deduction will include the cost of coverage. Actual billed amounts may vary.

**Continuity of coverage**

We will provide coverage for an Insured if the Insured was covered by a similar prior policy on the day before the Policy Effective Date. Coverage is subject to payment of premium and all other terms of the certificate. If an employee is on a temporary Layoff or Leave of Absence on the Policy Effective Date of this certificate, we will consider your temporary Layoff or Leave of Absence to have started on that date and coverage will continue for the period provided temporary Layoff or Leave of Absence under Continuation of your Coverage During Extended Absences in the certificate. If you have not returned to Active Employment before any Insured's Date of Diagnosis, any benefits payable will be limited to what would have been paid by the prior carrier.

Date of diagnosis must be after the coverage effective date.

**Exclusions and limitations**

Unum will not pay benefits for a claim that is caused by, contributed to by, or occurs as a result of any of the following:

- committing or attempting to commit a felony; being engaged in an illegal occupation or other willful criminal activity; "Willful criminal activity" includes, but is not limited to any of the following: (i) operating a vehicle while intoxicated as defined in the state in which the Accident occurred; or (ii) operating a methamphetamine laboratory. "Willful criminal activity" does not include a civil infraction or other activity that does not rise to the level of a misdemeanor or felony insurrection, participating in war or any act of war, whether declared or undeclared; combat or training for combat while serving in the armed forces of any nation or authority, including the National Guard, or similar government organizations; and a Date of Diagnosis that occurs while an insured is legally incarcerated in a penal or correctional institution.

Additionally, no benefits will be paid for a Date of Diagnosis that occurs prior to the Coverage Effective Date.

**End of employee coverage**

If you choose to cancel your coverage your coverage ends on the first of the month following the date you provide notification to your employer. Otherwise, your coverage ends on the earliest of the: date this policy is canceled by Unum or your employer; date you are no longer in an eligible group; date your eligible group is no longer covered; date of your death; last day of the period any required premium contributions are made; or last day you are in active employment.

However, as long as premium is paid as required, coverage will continue in accordance with the Continuation of your Coverage during Extended Absences provision or if you elect to continue coverage for you, your Spouse, and Children under Portability of Critical Illness Insurance.

Unum will provide coverage for a payable claim that occurs while you are covered under this certificate.

**THIS INSURANCE PROVIDES LIMITED BENEFITS**

This information is not intended to be a complete description of the insurance coverage available. The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. For complete details of coverage and availability, please refer to Policy Form GCIP16-1 or the Certificate Form GCIC16-1 or contact your Unum representative.

Underwritten by: Unum Insurance Company, Portland, Maine

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**Active employment:** You are considered in active employment if, on the day you apply for coverage, you are being paid regularly for the required minimum number of hours per week based on your position and you are performing the material and substantial duties of your regular occupation. Insurance coverage will be delayed if you are not in active employment because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective. New employees are eligible for coverage on the first of the month following the date of active employment. Please contact your plan administrator to confirm your eligibility. If enrolling, and eligible for Medicare (age 65+; or disabled) the Guide to Health Insurance for People with Medicare is available at [www.medicare.gov/sites/default/files/2022-03/02110-medigap-guide-health-insurance.pdf](http://www.medicare.gov/sites/default/files/2022-03/02110-medigap-guide-health-insurance.pdf).



# Hospital Insurance



## How does it work?

Hospital Insurance helps covered employees and their families cope with the financial impacts of a hospitalization. You can receive benefits when you're admitted to the hospital for a covered accident, illness or childbirth.

## Why is this coverage so valuable?

- The money is paid directly to you — not to a hospital or care provider. The money can also help you pay the out-of-pocket expenses your medical plan may not cover, such as co-insurance, co-pays and deductibles.
- You get affordable rates when you buy this coverage at work.
- The cost is conveniently deducted from your paycheck.
- The benefits in this plan are compatible with a Health Savings Account (HSA).
- You may take the coverage with you if you leave the company or retire, without having to answer new health questions. You'll be billed directly.
- The plan provides enhanced Hospital benefits of 25% when you use hospitals owned, operated, or controlled by your employer. This enhanced benefit applies to Hospital Admission, Hospital Daily Stay, and ICU Daily Stay.

Hospital		
Hospital Admission	Payable for a maximum of 1 day per year	\$500
Hospital Daily Stay	Payable per day up to 31 days	\$100
ICU Daily Stay	Payable per day up to 10 days	\$100

Hospital Insurance can pay benefits that help you with the costs of a covered hospital visit.

## Who can get coverage?

You:	If you're actively at work.
Your spouse:	Can get coverage as long as you have purchased coverage for yourself.
Your children:	Dependent children newborn until their 26th birthday, regardless of marital or student status

Employee must purchase coverage for themselves in order to purchase spouse or child coverage. Employees must be legally authorized to work in the United States and actively working at a U.S. location to receive coverage.

## How much does it cost?

Your monthly premium	
You	\$13.72
You and your spouse	\$27.54
You and your children	\$22.00
Family	\$35.82

Please refer to the certificate for complete definitions about these covered conditions. Coverage may vary by state. See exclusions and limitations.

This plan has a childbirth limitation. See disclosures for more information.

If enrolling, and eligible for Medicare (age 65+; or disabled) the Guide to Health Insurance for People with Medicare is available at [www.medicare.gov/sites/default/files/2022-03/02110-medigap-guide-health-insurance.pdf](http://www.medicare.gov/sites/default/files/2022-03/02110-medigap-guide-health-insurance.pdf)

## Exclusions and Limitations

Hospital insurance filed policy name is Group Hospital Indemnity Insurance Policy

### Active employment

You are considered in active employment if, on the day you apply for coverage, you are being paid regularly for the required minimum number of hours per week based on your position and you are performing the material and substantial duties of your regular occupation. Insurance coverage will be delayed if you are not in active employment because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective. New employees are eligible for coverage on the first of the month following the date of active employment. Please contact your plan administrator to confirm your eligibility.

### Continuity of coverage

We will provide coverage for an Insured if the Insured was covered by a similar prior policy on the day before the Policy Effective Date of this certificate.

Coverage is subject to payment of premium and all other terms of the certificate. If an employee is on a temporary Layoff or Leave of Absence on the Policy Effective Date of this certificate, we will consider your temporary Layoff or Leave of Absence to have started on that date and coverage will continue for the period provided temporary Layoff or Leave of Absence under Continuation of your Coverage During Extended Absences in the certificate.

If you have not returned to Active Employment before any Insured's covered loss, any benefits payable will be limited to what would have been paid by the prior carrier.

### Exclusions and limitations

Unum will not pay benefits for a claim that is caused by, contributed to by, or resulting from any of the following:

- Committing or attempting to commit a felony;
  - Being engaged in an illegal occupation or other willful criminal activity. "Willful criminal activity" includes, but is not limited to any of the following: (i) operating a vehicle while intoxicated in violation of Michigan's vehicle code, or any other act or law with similar intent; or (ii) operating a methamphetamine laboratory. "Willful criminal activity" does not include a civil infraction or other activity that does not rise to the level of a misdemeanor or felony;
  - Participating in war or any act of war, whether declared or undeclared;
  - Combat or training for combat while serving in the armed forces of any nation or authority, including the National Guard, or similar government organizations;
  - A Covered Loss that occurs while an Insured is legally incarcerated in a penal or correctional institution;
  - Elective procedures, cosmetic surgery, or reconstructive surgery unless it is a result of organ donation, trauma, infection, or other diseases;
  - Treatment for dental care or dental procedures, unless treatment is the result of a Covered Accident;
  - Any Admission or Daily Stay of a newborn Child immediately following Childbirth unless the newborn is Injured or Sick; and
  - Mental or Nervous Disorders. This exclusion does not include dementia if it is a result of:
    - Stroke, Alzheimer's disease, trauma, viral infection; or
    - Other conditions which are not usually treated by a mental health provider or other qualified provider using psychotherapy, psychotropic drugs, or other similar methods of treatment.
- Additionally, no benefits will be paid for a Covered Loss that occurs prior to the Coverage Effective Date.

### End of employee coverage

If you choose to cancel your coverage under this certificate, your coverage will end on the first of the month following the date you provide notification to your Employer.

Otherwise, your coverage under this certificate ends on the earliest of:

- the date the Policy is cancelled by us or your Employer;
- the date you are no longer in an Eligible Group;
- the date your Eligible Group is no longer covered;
- the date of your death;
- the last day of the period any required premium contributions are made; or
- the last day you are in Active Employment.

However, as long as premium is paid as required, coverage will continue in accordance with the Continuation of your Coverage During Absences provision or if you elect to continue coverage for you under Portability of Hospital Indemnity Insurance.

We will provide coverage for a Payable Claim that occurs while you are covered under this certificate.

### THIS INSURANCE PROVIDES LIMITED BENEFITS

This coverage is a supplement to health insurance. It is not a substitute for comprehensive health insurance and does not qualify as minimum essential health coverage as defined in federal law. Some states may require individuals to have comprehensive medical coverage before purchasing hospital insurance.

This information is not intended to be a complete description of the insurance coverage available. The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. For complete definitions of coverage and availability, please refer to Certificate Form GHIC16-1 and policy form GHIP16-1 or contact your Unum representative.

Unum complies with all state civil union and domestic partner laws when applicable.

Underwritten by: Unum Insurance Company, Portland, Maine

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# Sparrow Voluntary Benefit Self-Service Enrollment Instructions

Instructions to enroll in our Critical Illness, Accident, Hospital Indemnity plans, as well as Legal and ID Theft plans!

## First Login and Account Setup:

For best results, please use Chrome to view the enrollment

Your Company Login address is:

<http://boss.employeenavigator.com>

When you first arrive, please click the link toward the bottom of the page for “**Register as new user**”

You will need to **Create Your Account** by completing the fields on the next page

Please make certain your answers are the same as on file with Sparrow HR (try to use the spelling of your name from your paycheck)

Your “Company Identifier” is **Sparrow Implementation**



Username

Password

Login

[Reset a forgotten password](#)

[Register as a new user](#)

## Create Your Account

First, let's find your company record

First Name

Just

Last Name

Testing

Company Identifier

*(provided by HR)*

PIN

*(Last 4 Digits of SSN / ID)*

8569

Birth Date

*(mm/dd/yyyy)*

01/01/1975

Next >

# Sparrow Voluntary Benefit Self-Service Enrollment Instructions

Instructions to enroll in our Critical Illness, Accident, Hospital Indemnity plans, as well as Legal and ID Theft plans!

For your **username**, please enter your **email address**

The password must be 6 digits long and must include both a number and a symbol

You can click on “show it” to verify what you have typed

Click on the box next to “I agree with the terms of use” before proceeding

## Create Your Account

Then register a username and password

**Username**

*(company email is recommended)*

**Password**

*(minimum length of 6, number and symbol required)*

show it

I agree with the [terms of use](#)

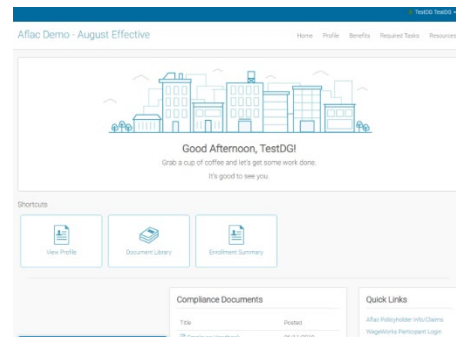
Next »

Once you have created your account you will see a welcome message

You can now re-login at the same login address:

<http://boss.employeenavigator.com>

by entering your new username (email) and your new password



## Questions or need more support?

Please call our enrollment partners at **1-855-421-9449!**



# Legal Insurance from ARAG

Designed for Sparrow Health System



## What does legal insurance cover?

With an UltimateAdvisor® legal insurance plan from ARAG®, **count on a wide range of coverage and services,** like the examples shown below — and many more — when you work with a Network Attorney to address the legal situations you may encounter in life.

### Consumer Protection

- ✓ Auto repair
- ✓ Buy or sell a car
- ✓ Consumer fraud
- ✓ Consumer protection for goods or services
- ✓ Home improvement
- ✓ Personal property disputes
- ✓ Small claims court

### Criminal Matters

- ✓ Juvenile
- ✓ Parental responsibility

### Debt-Related Matters

- ✓ Debt collection
- ✓ Garnishments
- ✓ Personal bankruptcy
- ✓ Student loan debt

### Driving Matters

- ✓ License suspension/revocation
- ✓ Traffic tickets

### Tax Issues

- ✓ IRS tax audit
- ✓ IRS tax collection

### Family

- ✓ Adoption
- ✓ Guardianship/conservatorship
- ✓ Name change
- ✓ Pet-related matters
- ✓ Divorce

### Landlord/Tenant Issues

- ✓ Contracts/lease agreements
- ✓ Eviction
- ✓ Security deposit
- ✓ Disputes with a landlord

### Real Estate & Home Ownership

- ✓ Buying a home
- ✓ Deeds
- ✓ Foreclosure
- ✓ Contractor issues
- ✓ Neighbor disputes
- ✓ Promissory notes
- ✓ Real estate disputes
- ✓ Selling a home

### Wills & Estate Planning

- ✓ Powers of attorney
- ✓ Wills

## What does it cost?

**UltimateAdvisor®**

Family: \$21.24 monthly

## Let's talk!

For more information, call **800-247-4184** or visit **ARAGLegalCenter.com**, access code **17876shs**.



## What is legal insurance?

**Legal coverage isn't just for the serious issues,** it's for your everyday needs, too. Legal insurance helps you address common situations like creating wills, transferring property or buying a home.



For the complete list of what your plan covers, visit: **ARAGLegalCenter.com** Access Code: **17876shs**

Limitations and exclusions apply. Depending upon a state's regulations, ARAG's legal insurance plan may be considered an insurance product or a service product. Insurance products are underwritten by ARAG Insurance Company of Des Moines, Iowa, GuideOne® Mutual Insurance Company of West Des Moines, Iowa or GuideOne Specialty Mutual Insurance Company of West Des Moines, Iowa. Service products are provided by ARAG Services, LLC. This material is for illustrative purposes only and is not a contract. For terms, benefits or exclusions, call our toll-free number.

## Why should you get legal insurance?



Receive **100% paid-in-full coverage** for most covered legal matters when you work with a Network Attorney.



Save an average of **\$2,100** per legal matter.\*



Access to more than **13,000 attorneys** within ARAG's network with an average of 20 years of experience.



Quickly address your covered legal situations with a Network Attorney who is only a **phone call away for legal help and representation.**



Use DIY Docs® to help you create any of **350+ legally valid documents**, including state-specific templates.

## How does legal insurance work?

- 1 **Call 800-247-4184** when you have a legal matter.
- 2 **Customer Care will walk you through your options** and help you find the appropriate Network Attorney.
- 3 **Meet with your Network Attorney** over the phone or in person to begin resolving your legal issue.

### Reviews from plan members

"ARAG gives me the right protection and makes me feel at ease when a legal situation that I have to solve arrives. I made the right decision joining ARAG a few years ago and will keep this plan protection for many years to come."

- Clara Miami, FL



## Sign up for legal insurance

Legal insurance is a part of your company's benefits that become available during open enrollment. Go to your benefits website for enrollment details. And, don't forget to get signed up for legal insurance!

## Identity Theft Protection

Protecting your personal information from identity thieves is more important than ever. Identity Theft Protection will help you guard against losses related to identity theft, with services designed to track changes to your credit file, monitor whether your identity is being bought or sold online and provide full-service restoration assistance if your identity is stolen.\*\*

Effective on: January 1, 2019

\* Average attorney rate in the United States of \$343 per hour for attorneys with 11 to 15 years of experience. "The Survey of Law Firm Economics: 2017 Edition." The *National Law Journal* and ALM Legal Intelligence, October 2017. Average amount saved based upon top ARAG in-office claims and the hours spent by attorneys per 2017 ARAG Claims Data. The hours spent are multiplied by the average attorney rate (less the average annual cost of an ARAG legal plan).

\*\* Eligibility, coverage, limitations and exclusions are governed by a separate coverage document. Please see the identity theft plan summary for details.