



# Every life has a story.

Meet Phil. Life looks picture perfect right now. A new job in a new city; his opportunities are opening up. He's engaged, too, so a family is on the horizon. He and his fiancée are planning their wedding and living the adventure of renovating a home. He takes care to follow safety measures, because one slip with a power tool can leave him suddenly unable to work and earn a living. Keeping up with home, car, food and utility payments could become a challenge and severely strain their savings.

Missed payments could put life at home in jeopardy. Recovery may hinge on the help of a nurse or therapist. Being disabled can cost more than most people might think. Trustmark Disability Income Insurance goes to work when you can't. It provides an income while you focus on recovery. It's that simple.

## How does Disability work?

Disability Income insurance replaces part of your paycheck when you are disabled<sup>1</sup> and unable to work. It can help you meet financial obligations when you don't have a paycheck coming in.

## What's covered?

Total disability due to:

- Non-occupational sickness
- Non-occupational injury
- Pregnancy (10 months after effective date)
- Complications of pregnancy

Benefit payment is subject to terms and conditions of coverage. Pre-existing conditions may apply.

## Why do you need it?

Take a moment, now, to think about life as you know it. Then ask yourself this: If you get sick or hurt off the job, how would you manage life without a paycheck?

- How long could you go without a paycheck?
- Would you be able to pay your mortgage or rent?
- Could you afford the new expenses that come with disability?



## How Disability benefits add up

### Example: \$1,000 monthly benefits

Jake ruptured a disc and continued to be disabled after his elimination period for another two months and 15 days.

	Benefits Paid
Jake's benefits following his elimination period and first month of disability	<b>\$1,000</b>
Jake's benefits for his second month of disability	<b>\$1,000</b>
Jake's benefits for his last 15 days of disability	<b>\$500</b>
<b>Total Benefits Paid<sup>1</sup></b>	<b>\$2,500</b>

## Total disability defined<sup>1</sup>

During the first year of disability, *totally disabled* means you are:

- Unable to work at your job
- Not working at your current employer
- Under a doctor's care for the injury or covered sickness causing your disability

<sup>1</sup> Definition and benefits may vary by state. See your policy or certificate for your state.

# Disability Income Insurance

Underwritten by Trustmark Insurance Company

**Trustmark**  
**Voluntary Benefit Solutions<sup>®</sup>**

PERSONAL. FLEXIBLE. TRUSTED.<sup>®</sup>

## Benefits you'll appreciate

- Benefits paid in full regardless of other coverage.
- Benefits for total and continuous disability due to a covered non-occupational injury or accident.
- Benefits paid at the same frequency as your paycheck.
- **Covered Maternity Benefits** – Total disability resulting from a pregnancy or childbirth is covered the same as sickness when it commences after the plan has been in effect for a period of 10 months or more.
- **Waiver of Premium** – Waives premium if you remain disabled for 90 consecutive days during the benefit period.
- **Guaranteed Renewable<sup>2</sup>** – Guaranteed coverage to age 72, as long as premiums are paid.
- **Level Premiums** – Enjoy rates that don't increase because of age.
- **Portability** – Take your coverage with you and pay the same premium if you change jobs or retire. Benefit periods end at age 72.
- **Convenient Payroll Deduction** – No bills to watch for. No checks to mail. A direct bill option is available when you change jobs or retire.

<sup>1</sup> Subject to terms and conditions of coverage.

<sup>2</sup> In some states, Conditionally Guaranteed Renewable.

Please consult your policy/certificate for your state's exact terms and provisions.

## Key Terms You Need to Know

**Elimination period.** There may be a period after you become disabled before your benefits begin, known as the elimination period. See policy/certificate for details.

**Exclusions.** Generally no benefits are paid for disability which results from your involvement in any period of armed conflict, even if it is not declared; riding in or driving any motor-driven vehicle in a race, stunt show or speed test; operating, learning to operate, serving as a crew member of or jumping or falling from any aircraft, including those which are not motor-driven (this does not include flying as a fare-paying passenger); participating or attempting to participate in an illegal activity; committing or trying to commit suicide or injuring yourself intentionally, whether you are sane or not; addiction to use of alcohol or drugs; having a pre-existing condition as described and limited in the plan certificate; having a work-related injury; and having a psychiatric or psychological condition including but not limited to affective disorders, neuroses, anxiety, stress and adjustment reactions. However, Alzheimer's disease and other organic senile dementia are covered. Exclusions may vary by state mandates.

It's your story. Help protect it with Disability Income insurance.



**Trustmark**  
**Voluntary Benefit Solutions<sup>®</sup>**  
PERSONAL. FLEXIBLE. TRUSTED.<sup>®</sup>

Underwritten by Trustmark Insurance Company • Rated A- (EXCELLENT) A.M. Best<sup>1</sup>  
400 Field Drive • Lake Forest, IL 60045 • [trustmarksolutions.com](http://trustmarksolutions.com)   

If you have questions, please call 419-930-5977 or email [lucascountyservice@strategicenroll.com](mailto:lucascountyservice@strategicenroll.com).

Most insurance policies contain exclusions, limitations and terms for keeping them in force. Your representative will be glad to provide you with costs and complete details. See Plan DI-902 for your state for exact terms and provisions. This policy is designed to provide you with coverage for disabilities resulting from covered accidents or covered sicknesses. It is not a Medicare supplement policy. It is not a policy of workers' compensation insurance and will not cover accidents or sicknesses covered by worker's compensation insurance. This policy is supplemental and not designed to cover all medical expenses. It is not a substitute for a health benefit plan. This policy does not cover basic hospital, basic medical or major medical expenses. In MA, you must have a health benefit plan in order to purchase this insurance. Please read your policy or certificate carefully for complete information.

<sup>1</sup> An A.M. Best rating is an independent opinion of an insurer's financial strength and ability to meet its ongoing insurance policy and contract obligations. Trustmark is rated A- (4th out of 16 possible ratings ranging from A++ to Suspended).

DI\_nopx\_lucas

**Brochure expires 2-3-17.**

# Every life has a story.

Meet Jane. Right now, life looks picture perfect. Jane has little to worry about, and she'd like to keep it that way. But how?

Trustmark Universal Life insurance can help. It can help protect her family from financial hardship if something happens to her or her spouse. It's that simple.



## How does Universal Life work?

Universal Life insurance combines two important benefits – long-term care and permanent life insurance – into one affordable product.

permanent life insurance  
+ long-term care  

---

Universal Life insurance



With Universal Life, your benefits can be paid as a Death Benefit, as Living Benefits, or as a combination of both. Let's take a closer look.

### Death Benefit

Most people buy life insurance for the financial security of the death benefit. And it's easy to see why. A death benefit puts money in your family's hands quickly when they need it most. It's money they can use any way they want to help cover short- and long-term expenses like these:

- Funeral costs
- Rent or mortgage payments
- College tuition for children or grandchildren
- Debt
- Retirement and more



### Living Benefits

Long-term care can be expensive. Living benefits make it easy to accelerate the death benefit to help pay for home healthcare, assisted living, adult day care or nursing home services, should you or your covered spouse ever need them.

#### You may also consider:

**Universal LifeEvents®** pays a higher death benefit during your working years when expenses are high and your family needs maximum protection. Then, at age 70 (or 15th policy anniversary, whichever comes later) when your financial needs are lower, your death benefit reduces to one-third the value while the LTC benefit amount continues at the original higher level.

## Let's see how Living Benefits add up

Example: \$100,000  
Death Benefit

Maximum Benefit  
Amount

### Long-Term Care Benefit (LTC)\*

Pays a monthly benefit equal to 4 percent of your death benefit for up to 25 months. The LTC benefit accelerates the death benefit and proportionately reduces it.

\$100,000

### Benefit Restoration

Restores the death benefit that is reduced to pay for LTC, so your family receives the full death benefit amount when they need it most.

\$100,000

**Total Maximum Benefit**  
Living Benefits can double the  
value of your life insurance.

\$200,000

\*The LTC Benefit is an acceleration of the death benefit and is not Long-Term Care Insurance. It begins to pay after 90 days of confinement or services, and to qualify you must meet conditions of eligibility for benefits. Pre-existing condition limitation may apply. Living Benefits may not be available in all states or may be named differently. Please consult your policy for complete details.

# Universal Life Insurance

Trustmark  
**Voluntary Benefit Solutions®**

PERSONAL. FLEXIBLE. TRUSTED.®

Underwritten by Trustmark Insurance Company

## Features you'll appreciate

**Lifelong protection** – Provides coverage that will last your lifetime.

**Family coverage** – Apply for your spouse, children and grandchildren even if you choose not to participate.

**Terminal Illness Benefit** – Accelerates up to 75 percent of your death benefit if your doctor determines your life expectancy is 24 months or less.

**Guaranteed renewable** – Guaranteed coverage, as long as your premiums are paid. Your premium may change if the premium for all policies in your class changes.

### Separately priced benefits:

**Long-Term Care Rider** – Pays a monthly benefit equal to 4 percent of your death benefit for up to 25 months. The LTC benefit accelerates the death benefit and proportionately reduces it.

**Benefit Restoration Rider** – Restores the death benefit that is reduced to pay for LTC, so your family receives a full death benefit when they need it most.

**EZ Value** – Automatically raises your benefits to keep pace with your increasing needs, without additional underwriting.



### Why buy Universal Life at work?

- 1. Portability** – Take your coverage with you and pay the same premium if you change jobs or retire.
- 2. Payroll deduction** – No bills to watch for. No checks to mail. A direct bill option is available when you change jobs or retire.
- 3. One-on-one guidance** – You'll get personalized benefit advice and assistance with the application process.



If you have questions, please call 419-930-5977 or email [lucascountyservice@strategicenroll.com](mailto:lucascountyservice@strategicenroll.com).

It's your story. Help protect it with Trustmark Universal Life insurance.

**Trustmark**  
**Voluntary Benefit Solutions**<sup>®</sup>  
PERSONAL. FLEXIBLE. TRUSTED.<sup>®</sup>

Underwritten by Trustmark Insurance Company • Rated A- (EXCELLENT) A.M. Best<sup>1</sup>  
400 Field Drive • Lake Forest, IL 60045 • [trustmarksolutions.com](http://trustmarksolutions.com)   

This provides a brief description of your benefits. Your representative can provide you with costs and complete details. See Plan GUL.205/IUL.205; HH/LTC.205; BRR.205 and ABR.205 for exact terms and provisions. Benefits, exclusions and limitations may vary by state and may be named differently. Please consult your policy for complete information.

In Oregon, this policy features a no-lapse guarantee that ensures coverage will not lapse for 14 years as long as premiums are paid as planned. If you make changes to policy benefits during this period or pay only the minimum premium, you may be foregoing the advantage of building cash value or reducing the benefit amount. If there is negative cash value at the end of the no-lapse period, you must pay enough premium to establish positive cash value. You may also need to maintain the policy with a higher premium than the one you paid to satisfy the no-lapse guarantee.

<sup>1</sup> An A.M. Best rating is an independent opinion of an insurer's financial strength and ability to meet its ongoing insurance policy and contract obligations. Trustmark is rated A- (4th out of 16 possible ratings ranging from A++ to Suspended).

1 UL-LTC-BRR-EZV\_Lucas

"NAMED ONE OF THE  
**MOST INNOVATIVE**  
PRODUCTS OF 2015."

Source: Lifehealthpro.com, May 15, 2015. [http://www.lifehealthpro.com/2015/05/15/the-6-most-innovative-industry-products-of-2015?page\\_all=1](http://www.lifehealthpro.com/2015/05/15/the-6-most-innovative-industry-products-of-2015?page_all=1)

Let's talk life.®



Trustmark  
**Critical LifeEvents<sup>SM</sup>**  
Insurance

(Lump-Sum Critical Illness/Specified Disease Insurance)  
CBO

When critical illness touches your life

Trustmark  
**Voluntary Benefit Solutions<sup>®</sup>**

PERSONAL. FLEXIBLE. TRUSTED.®

Underwritten by Trustmark Insurance Company

# Every life has a story.

## You have a picture of the way you want your life to go.

Now imagine if something happens that not only changes your picture, it changes your life story.

Trustmark Critical LifeEvents<sup>SM</sup> insurance can help. It can help you live your story, your way – even when your health gets in the way.



A revolutionary concept in Critical Illness insurance built by people like you.

## Life goes on.

You have responsibilities – to yourself and to your family. If you get sick you need to rely on others for help, and your family still needs attention. If a family member gets sick, you attend to their needs. And the demands of life still go on.

Trustmark talked to patients and to those giving care when developing the new Critical LifeEvents insurance. This coverage is designed to focus on critical illness the way it is experienced by those closest to it.

## Critical LifeEvents insurance – a lifetime of benefits.

Due to earlier diagnoses, improvements in treatment and changes in lifestyle risk factors, cancer, heart attack and stroke are showing higher survival rates.<sup>1</sup> Early diagnosis can be a lifesaver, yet successful treatment may be expensive, and a critical illness can sometimes come back again.

Trustmark's Critical LifeEvents focuses on more aspects of the ways critical illness touches your life.

- The base policy focuses on the conditions that are most likely to occur.<sup>2</sup> This helps keep coverage affordable because you aren't paying premiums for a list of unlikely conditions.
- Benefits are payable for early identification as well as for later-stage diagnosis.
- Earlier benefits help provide funds as quickly as possible to help ensure that treatment or preventive measures may stave off late-stage illness.
- A replenishing annual benefit helps you deal with a new or recurring covered condition.
- Events that trigger a benefit are simple and easy to understand.

You are not alone when you have Trustmark protection. Life goes on. And so does your Trustmark Critical LifeEvents insurance.

90% of Critical Illness insurance claims are for cancer, heart attack or stroke<sup>2</sup>.

*I should hope that a benefit would be payable at the first signs of cancer, coronary disease and cerebral vascular disease (stroke).*

*If I catch my cancer early, I still need help with unexpected expenses.*

**"As a medical doctor, I can heal (someone) physically. But only insurers can repair (a person's) finances."**

**Marius Barnard, M.D.** South African physician, was on the medical team that did the first successful human heart transplant in 1967. In 1983, Dr. Barnard created Critical Illness insurance.

<sup>1</sup> Cancer Facts & Figures 2015; AHA Statistical Update, Heart Disease and Stroke Statistics – 2014 Update.

<sup>2</sup> U.S. Critical Illness Insurance Market Survey, 2012/2013 Results, conducted by Gen Re, A Berkshire Hathaway Company

## How does Trustmark Critical LifeEvents<sup>SM</sup> work?

Your selected base benefit amount becomes your annual maximum that is available each and every calendar year when there's a new diagnosis of a covered critical illness\*. Depending on the diagnosis you receive, your benefit payment may be 100%, 50% or 10% of your selected benefit amount, not to exceed the annual maximum available. There is no lifetime maximum on the number of payouts.



## How is the benefit paid?

10% benefit	50% benefit	100% benefit
 <p><b>Cancer</b></p> <ul style="list-style-type: none"> <li>Invasive basal/squamous cell skin cancer</li> <li>In situ cancer</li> <li>Benign brain, spinal cord and cranial nerve tumors</li> <li>Myelodysplastic syndrome</li> </ul>	 <p><b>Cancer</b></p> <ul style="list-style-type: none"> <li>Stage 1 melanoma</li> <li>Stage 1 or 2 cancers, no lymph node involvement</li> </ul>	 <p><b>Cancer</b></p> <ul style="list-style-type: none"> <li>Stage 3 or higher</li> <li>Stage 2 involving lymph nodes</li> <li>Melanoma stage 2 or higher</li> <li>Stage 1 or higher: pancreas, esophagus, leukemia, lung, liver, biliary tract, head and neck, lymphoma, multiple myeloma</li> </ul>
 <p><b>Coronary artery disease</b> - initial diagnosis after assessment and recommended treatment</p>	 <p><b>Coronary artery disease</b> -</p> <ul style="list-style-type: none"> <li>Coronary artery obstruction</li> <li>Heart attack when clinically diagnosed</li> </ul>	 <p><b>Coronary artery disease</b> - heart attack</p>
 <p><b>Cerebral vascular disease "mini-stroke"</b> - Transient Ischemic Attack (TIA) including Reversible Ischemic Neurologic Deficit (RIND)</p>	 <p><b>Cerebral vascular disease</b> -</p> <ul style="list-style-type: none"> <li>Stroke with less than 30 days impairment</li> <li>Stroke when clinically diagnosed</li> </ul>	 <p><b>Cerebral vascular disease</b> - Stroke with at least 30 days impairment</p>

\*A 30-day waiting period may apply before benefits are payable. Please consult your policy/group certificate for specific covered illnesses and details.

## Why do you need it?

*If critical illness strikes, how would recovery, and living with critical illness, affect you and your family?*

- Who will care for you, your children; how will you manage your daily matters?
- Did your diagnosis catch it early enough, and what are your treatment options? Do you have access to experts to verify your diagnosis and treatment plan?
- If your illness were to progress to later stages, are additional funds available?

### Facts about surviving critical illness

More people are surviving and living with critical illness. Trustmark Critical LifeEvents benefits help provide more continuity to get on with your life.

<b>Cancer</b>	The <b>5-year survival rate</b> for cancers is improving as more Americans receive regular cancer screenings. Source: American Cancer Society, 2012.
<b>Heart</b>	From 2000 to 2010, death rates attributed to cardiovascular disease <b>declined 31%</b> . Source: American Heart Association, 2012.
<b>Stroke</b>	The average cost for outpatient stroke rehab and medications the <b>1st year</b> after inpatient discharge was <b>\$11,145</b> . Source: American Heart Association, 2014, reporting on the time period 2001-2005.

## Access to medical experts, provided by:



Expert medical review complements the care you receive from your own physician. Receive one-on-one support from Best Doctors, a leader in connecting you to medical information you may need for a wide range of medical conditions.

Best Doctors can provide case review through a network of more than 50,000 world-class medical specialists. Whether you need help resolving conflicting diagnoses, finding a specialist or getting assistance for medical appointments or hospital admittance, Best Doctors can help when you need it most. Membership is automatic at no additional cost to you while your coverage is in force.

## Use this chart to take notes when you meet with a benefits counselor.

Coverage for me:	<input type="text"/>
Coverage for my spouse:	<input type="text"/>
Coverage for my children:	<input type="text"/>
Deductions: \$	<input type="text"/>
Start Date:	<input type="text"/>

## Features you'll appreciate

- **Base benefit amount/annual maximum** – Choose a benefit which creates your calendar year annual maximum amount available for benefit payouts. Benefit amounts may vary by underwriting conditions. Please consult your policy/group certificate for details.
- **Guaranteed renewable** – Guaranteed active coverage for life, as long as premiums are paid. Your premium may change if the premium for all policies in your class changes.
- **Level premiums and coverage** – Enjoy rates that don't increase and benefits that don't decrease because of age.
- **Family coverage** – Apply for your spouse, children and dependent grandchildren.
- **Portability** – Take your coverage with you and pay the same premium even if you change jobs or retire.
- **Convenient payroll deduction** – No checks to write. A direct bill option is available when you change jobs or retire.



If you have questions, please call 419-930-5977 or email [lucascountyservice@strategicenroll.com](mailto:lucascountyservice@strategicenroll.com).

## Trustmark Voluntary Benefit Solutions®

Underwritten by Trustmark Insurance Company

Rated A- (EXCELLENT) A.M. Best<sup>1</sup>

400 Field Drive • Lake Forest, IL 60045 • [trustmarksolutions.com](http://trustmarksolutions.com)   

Most insurance policies contain exclusions, limitations and terms for keeping them in force. Your representative will be glad to provide you with costs and complete details. Your policy and applicable riders CII 214, SIR 214, ASR 214, HLR 214, CGR 214, WPD 214, WPC 214, MAR 214, and EZV 214 for your state will contain exact terms and provisions.

This critical illness/specified disease insurance policy/group certificate provides supplemental health insurance coverage, which pays a limited, lump-sum benefit for specified diseases only. It is not a substitute for medical expense insurance, major medical expense insurance or a health benefit plan alternative. It does not provide comprehensive medical coverage. It is not intended to pay all medical costs associated with the specified diseases and is not designed to provide coverage for other medical conditions or illnesses. It is also not a Medicare Supplement policy, nor is it a policy of worker's compensation. Please refer to your policy/group certificate and outline of coverage, if applicable, for complete information. Limitations on pre-existing conditions may apply. In NH and NY, this is a specified disease policy. In MA, you must have a health benefit plan to purchase this insurance.

<sup>1</sup> An A.M. Best rating is an independent opinion of an insurer's financial strength and ability to meet its ongoing insurance policy and contract obligations. Trustmark is rated A- (4th out of 16 possible ratings ranging from A++ to Suspended).

# Healthy Living rider

## Annual screenings, preventive services

Prevention and early detection can be key to maintaining good health and wellness. Healthy Living insurance benefits offset the cost of going to the doctor for screenings and tests.



### What's covered\*:

**Routine services** for early detection and prevention help you stay well. One \$50 routine service benefit per calendar year after the effective date and waiting period, if applicable. The covered screenings include:

- Mammography
- Pap smear
- Flexible sigmoidoscopy
- Hemoccult stool analysis
- Colonoscopy
- Prostate specific antigen (PSA) test for prostate cancer
- Doppler screening of carotid arteries
- EKG/ECG
- CT colonography
- Human Papillomavirus vaccination (HPV)
- CA 125 blood test
- Whole body skin cancer screening exam

**Follow-up diagnostic tests**, within 12 months following a routine service test to investigate possible cancer, coronary artery disease or cerebral vascular disease. One \$50 diagnostic benefit per calendar year.

**Biometric screenings** encourage you to "know your numbers." Includes fasting blood glucose test or lipid panel. One \$25 screening benefit per calendar year.

**Genetic testing**, following a physician's recommendation because you are at high risk of, or have been diagnosed with, cancer. One \$250 benefit is payable once per person when the genetic test is performed within 12 months of the recommendation. If you have a marker, the benefit doubles to \$500 to help pay for additional counseling.

### Multiple benefits payable throughout the year:

BIOMETRICS

\$

ROUTINE TESTS

\$

FOLLOW-UP TEST

\$

GENETIC TESTING

\$

Fill in the benefit amounts you find in the descriptions above to determine your potential annual benefit under the Healthy Living rider.

\$

\*Calendar-year benefits, except for genetic testing, which is a one-time benefit per person are payable after the effective date and waiting period, if applicable.

This limited benefit rider is part of Plan Form CII 214, underwritten by Trustmark Insurance Company, Lake Forest, Illinois, and is subject to policy terms and conditions. Please refer to the contract for a complete description of benefit provisions, exclusions and limitations.

# Every life has a story.

Meet Dee, whose life looks picture perfect. A house, two cars, husband, kids – the American dream. Everyone is active and healthy. Yet accidents are just a part of life – from the soccer field to the ski slope and the highway in between. Ending up in urgent care can hurt more than a knee; it can hit a family hard with immediate medical expenses.

Emergency costs can add up quickly. One trip to ER may involve many services – an ambulance ride, X-rays, medicines and physician fees. Trustmark Accident Insurance provides a measure of financial security by helping to take care of the unexpected bills from an accident, so you can heal. It's that simple.



## How does it work?

Trustmark Accident insurance is designed to cover unexpected expenses that result from all kinds of accidents, even sports-related and household ones.<sup>1</sup> It provides cash benefits to cover things your health insurance doesn't.

## What's covered?

**Initial Care Benefits:** Physician visit, ambulance, emergency room treatment, hospital benefits, lodging, blood, surgery, emergency dental

**Injury Benefits:** Burn; concussion; dislocation; eye injury; fracture; herniated disc; laceration; loss of finger, toe, hand, foot, sight; tendon, ligament, rotator cuff injury; torn knee cartilage

**Follow-up Care Benefits:** Physical therapy, appliances, prosthetic device, artificial limb, skin graft, transportation



<sup>1</sup>Please consult your policy/group certificate for exclusions, limitations and policy details. <sup>2</sup>In some states, spouse, domestic partner or civil union partner.

## Benefits you'll appreciate

- Benefits paid directly to you without any restrictions on how you can use them.
- Benefits are paid to you regardless of any other coverage you have.
- **Guaranteed Issue** – There are no medical questions you'll have to answer, but your spouse or domestic partner must answer a disability question.
- **Guaranteed Renewable** – Renewable as long as premiums are paid.
- **Level Premiums and Benefits** – Rates don't increase and benefits don't decrease because of age.
- **Family Coverage** – Apply for your spouse<sup>2</sup>, children and dependent grandchildren.
- **Portability** – Take your coverage with you and pay the same premium. It's yours to keep even if you change jobs or retire.
- **Convenient Payroll Deduction** – No bills to watch for. No checks to mail. A direct bill option is available when you change jobs or retire.

It's your story. Help protect it with Accident insurance.

### THIS IS A LIMITED POLICY

This provides a brief description of benefits and is not a contract. Plan availability and/or coverage, benefits, definitions, exclusions and limitations may vary by state. See Plan A-607, [WB607], [HS-12000], [LCWP-501] and other optional riders for your state for exact terms and provisions. This is an Accident only policy/group certificate with limited benefits and does not pay benefits for diseases, sickness or for loss from sickness. This is not a Worker's Compensation Policy nor a Medicare policy. Benefits are supplemental and not intended to cover all medical expenses. In MA, this health plan alone does not meet Minimum Creditable Coverage standards and will not satisfy the individual mandate that you have health insurance. In WY, this policy/group certificate does not contain comprehensive adult wellness benefits as defined by state law.

## Accident Insurance

Trustmark  
Voluntary Benefit Solutions®

PERSONAL. FLEXIBLE. TRUSTED.®

Underwritten by Trustmark Insurance Company

# Schedule of Benefits<sup>1</sup>

## Accident Insurance Provides 24-Hour Coverage

Benefit	Amount
<b>Initial Care</b>	
<b>Hospital Benefits</b>	
Admission Benefit (per admission)	<b>\$2,000</b>
Confinement Benefit (per day up to 365 days)	<b>\$400</b>
ICU Benefit (per day up to 15 days)	<b>\$600</b>
<b>Emergency Room Treatment</b>	<b>\$200</b>
<b>Ambulance</b>	
Ground	<b>\$200</b>
Air	<b>\$1,000</b>
<b>Initial Doctor's Office Visit</b>	<b>\$100</b>
<b>Lodging</b> (per night up to 30 days per accident)	<b>\$200</b>
<b>Surgery Benefit</b>	
Open, abdominal, thoracic	<b>\$2,000</b>
Exploratory	<b>\$200</b>
<b>Blood, Plasma and Platelets</b>	<b>\$600</b>
<b>Emergency Dental Benefit</b>	
Extraction	<b>\$100</b>
Crown	<b>\$300</b>
<b>Follow-Up Care</b>	
<b>Accident Follow-Up Treatment</b>	<b>\$100</b>
<b>Physical Therapy</b>	
Up to six visits per person per accident	<b>\$50</b>
<b>Appliance</b>	<b>\$200</b>
<b>Transportation</b>	
100+ miles, up to three trips	<b>\$475</b>
<b>Prosthetic Device or Artificial Limb</b>	
More than one	<b>\$2,000</b>
One	<b>\$1,000</b>
<b>Skin Grafts</b>	<b>25% of applicable burn benefit</b>



**If you have questions, please call 419-930-5977 or email [lucascountyservice@strategicenroll.com](mailto:lucascountyservice@strategicenroll.com).**

Benefit	Amount
<b>Injuries</b>	
<b>Fractures</b>	
Open reduction	<b>up to \$10,000</b>
Closed reduction	<b>up to 5,000</b>
Chips	<b>25% of applicable closed reduction</b>
<b>Dislocations</b>	
Open reduction	<b>up to \$8,000</b>
Closed reduction	<b>up to \$4,000</b>
<b>Laceration</b>	<b>Up to \$800</b>
<b>Burns</b>	
Flat amount for:	
Third-degree 35 or more sq. in.	<b>\$15,000</b>
Third-degree 9-34 sq. in.	<b>\$2,250</b>
Second-degree for 36% or more of body	<b>\$1,125</b>
<b>Concussion</b>	<b>\$200</b>
<b>Eye Injury</b>	
Requires surgery or removal of foreign body	<b>\$400</b>
<b>Herniated Disc</b>	<b>\$800</b>
<b>Loss of Finger, Toe, Hand, Foot or Sight</b>	
Loss of both hands, feet, sight of both eyes or any combination of two or more losses	<b>\$15,000</b>
Loss of one hand, foot or sight of one eye	<b>\$7,500</b>
Loss of two or more fingers, toes or any combination of two or more losses	<b>\$1,500</b>
Loss of one finger or one toe	<b>\$750</b>
<b>Tendon/Ligament/Rotator Cuff Injury</b>	
Repair of more than one	<b>\$1,200</b>
Repair of one	<b>\$800</b>
Exploratory surgery without repair	<b>\$200</b>
<b>Torn Knee Cartilage</b>	
Exploratory surgery	<b>\$1,000</b>
	<b>\$200</b>
<b>Health Screening Benefit</b>	
<b>One Per Person Per Year</b>	<b>\$100</b>
Routine health screening tests	

<sup>1</sup>Benefits are payable only as the result of a covered accident. Benefits may vary by state and additional benefits may be available in some states. Most benefits are paid once per person per covered accident unless otherwise noted.

# Hospital Indemnity Insurance

from Allstate Benefits



Benefits are paid to you

Protection for hospital stays when a sickness or injury occurs

## 1 CHOOSE

You choose our coverage to protect yourself and any family members, should you be hospitalized

## 2 USE

You or a covered family member has an illness or injury that requires medical care in the hospital

## 3 CLAIM

You file a claim. The cash benefits are paid to you, to use however you wish

**Life is unpredictable. Without any warning, an illness or injury can lead to a hospital visit – and costly out-of-pocket expenses.**

Expenses associated with a hospital stay can be financially difficult if money is tight and you are not prepared. But having the right coverage in place before you experience a sickness or injury can help eliminate your financial concerns and provide support at a time when it is needed most.

Allstate Benefits offers a solution to help you protect your income and empower you to seek treatment.



Medical costs in the United States are among the highest in the world. In 2013, the average hospital cost per day in the United States was \$4,293.\*

### Here's How it Works

Our Indemnity Medical insurance pays a cash benefit for hospital confinement. This benefit is payable directly to you and can keep you from withdrawing money from your personal bank account or your Health Savings Account (HSA) for hospital-related expenses. This is especially helpful since statistics show the average hospital stay is approximately 5 days,<sup>1</sup> which can add up quickly. On top of that, the number of people who forgo or delay needed health care due to the high cost has nearly doubled in the past 10 years<sup>2</sup>. These facts make it increasingly important to not only protect your finances if faced with an unexpected illness, but also to empower yourself to seek the necessary treatment.

With Allstate Benefits, you can feel assured that you have the protection you need if faced with a hospitalization.

**Are you in Good Hands? You can be.**

### Key Features

- Guaranteed Issue coverage, meaning no medical questions to answer
- Coverage available for spouse and child(ren)
- Premiums are affordable and are conveniently payroll deducted
- Coverage may be continued, as long as premiums are paid to Allstate Benefits, as defined under the Portability provision.

*See reverse for plan details*

For information please call (419) 930-5977

LUCAS COUNTY

SES

\*2013 Comparative Price Report, International Federation of Health Plans  
<sup>1</sup><http://www.cdc.gov/nchs/data/hus/2012/099.pdf>  
<sup>2</sup><http://www.nachc.com/client/HealthWanted.pdf>

## YOU DECIDE how to use the cash benefits

Our cash benefits provide you with greater coverage options because you get to determine how to use them.



### Finances

Can help protect your HSAs, savings, retirement plans and 401ks from being depleted



### Travel

You can use your cash benefits to help pay for expenses while receiving treatment in another city



### Home

You can use your cash benefits to help pay the mortgage, continue rental payments, or perform needed home repairs for your after care



### Expenses

The lump-sum cash benefit can be used to help pay your family's living expenses such as bills, electricity and gas

## Benefits

### Base Policy Benefits

#### First Day Hospital Confinement

#### Daily Hospital Confinement

#### Hospital Intensive Care

Your coverage may or may not include hospitalization due to pregnancy or **complications of pregnancy**<sup>†</sup>. However, a newborn child's initial confinement in a hospital and a newborn child's routine nursing or well-baby care during the initial confinement in a hospital are not payable. A newborn child's initial confinement in a hospital includes any transfers to another hospital before being discharged to go home.

<sup>†</sup> Subject to state variations and employer selections.

For use in enrollments situated in: OH

**This material is valid as long as information remains current, but in no event later than December 2, 2019.** Group Hospital Indemnity benefits are provided by policy form GVSP2, or state variations thereof.

Coverage is provided by Limited Benefit Hospital Indemnity Insurance. The policy is not a Medicare Supplement Policy. If eligible for Medicare, review Medicare Supplement Buyer's Guide available from Allstate Benefits. This information highlights some features of the policy but is not the insurance contract. For complete details, contact your Allstate Benefits Agent. This is a brief overview of the benefits available under the Group Voluntary Policy underwritten by American Heritage Life Insurance Company (Home Office, Jacksonville, FL). Details of the insurance, including exclusions, restrictions and other provisions are included in the certificates issued.

**The coverage does not constitute comprehensive health insurance coverage (often referred to as "major medical coverage") and does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.**



Allstate Benefits is the marketing name used by American Heritage Life Insurance Company, a subsidiary of The Allstate Corporation. ©2016 Allstate Insurance Company. [www.allstate.com](http://www.allstate.com) or [allstatebenefits.com](http://allstatebenefits.com)

# Hospital Indemnity (GIM2)

## Group Indemnity Medical Insurance from Allstate Benefits

See attached **Important information About Coverage.**

Offered to the employees of:

## Lucas County

### BENEFIT AMOUNTS

BASE POLICY BENEFITS	PLAN 1	PLAN 2
First Day Hospital Confinement Benefit	\$500	\$1,000
Limit to Number of Occurrences	One per Month	One per Month
Pregnancy (Normal and Complications) Covered	Covered	Covered
Daily Hospital Confinement Benefit	\$100	\$100
Maximum Number of Days <sup>1</sup>	30 Days Max	30 Days Max

<sup>1</sup> payable for each day, up to the max per continuous confinement in a hospital; not paid for any day the First Day Hospital Confinement Benefit is paid

OPTIONAL EXCLUSIONS	PLAN 1	PLAN 2
Mental and Nervous Disorders Covered	No	No
Drug Addiction and Alcoholism Covered	No	No
Pregnancy Waiting Period	None	None
ADDITIONAL OPTIONS	PLAN 1	PLAN 2
Removal of Pre-Existing Conditions Limitation	Yes	Yes

### PLAN 1 PREMIUMS

MODE	EE	EE + SP	EE + CH	F
Bi-Weekly	\$4.08	\$10.86	\$7.08	\$11.76

EE=Employee; EE + SP = Employee + Spouse; EE + CH = Employee + Child(ren); and F = Family

### PLAN 2 PREMIUMS

MODE	EE	EE + SP	EE + CH	F
Bi-Weekly	\$6.90	\$19.38	\$11.94	\$20.76

EE=Employee; EE + SP = Employee + Spouse; EE + CH = Employee + Child(ren); and F = Family



For use in enrollments situated in: OHIO. This rate insert is part of the approved flyer for Lucas County SES and form number ABJ30067-1 and is not to be used on it's own.

This rate insert is valid as long as information remains current, but in no event later than 12/1/2019. Allstate Benefits is the marketing name used by American Heritage Life Insurance Company (Home Office, Jacksonville, FL), a subsidiary of The Allstate Corporation. ©2016 Allstate Insurance Company. [www.allstate.com](http://www.allstate.com) or [allstatebenefits.com](http://allstatebenefits.com).

# Cancer Insurance

from Allstate Benefits



Benefits are paid to you

Protection for the treatment of cancer and 29 specified diseases

## 1 CHOOSE

You choose benefits to help protect yourself and family members, if diagnosed with cancer or specified disease

## 2 USE

You or a covered family member are diagnosed with cancer or a specified disease and seek medical treatment

## 3 CLAIM

You go online and file a claim. The cash benefits are paid to you, to use however you wish

Receiving a cancer diagnosis can be one of life's most frightening events. Unfortunately, statistics show you probably know someone who has been in this situation.

With Cancer insurance from Allstate Benefits, you can rest a little easier. Our coverage pays you a cash benefit to help with the costs associated with treatments, to pay for daily living expenses – and more importantly – to empower you to seek the care you need.

### Factors that influence cancer survival<sup>1</sup>



Early Detection



Improved Treatments



Access To Care

The **number of cancer survivors** in the United States **is increasing**, and is expected to jump to nearly 19 million by 2024<sup>2</sup>

### Here's How It Works

You choose the coverage that's right for you and your family. Our Cancer insurance pays cash benefits for cancer and 29 specified diseases to help with the cost of treatments and expenses as they happen. Benefits are paid directly to you unless otherwise assigned. With the cash benefits you can receive from this coverage, you may not need to use the funds from your Health Savings Account (HSA) for cancer or specified disease treatments and expenses.

With Allstate Benefits, you can protect your finances if faced with an unexpected cancer or specified disease diagnosis.

Are you in Good Hands? You can be.

### Key Features

- Benefits are paid directly to you unless otherwise assigned
- Coverage available for you or your entire family
- Waiver of premium after 90 days of disability due to cancer for as long as your disability lasts (Primary insured only)
- Coverage may be continued
- Additional benefits may be added to your coverage, if your employer has chosen to make them available to you

[See reverse for plan details](#)

For information please call (419) 930-5977



<sup>1</sup>[www.cancer.org/research/infographicgallery/survivorship-life-after-cancer?\\_ga=1.252987849.1528396581.1424877086](http://www.cancer.org/research/infographicgallery/survivorship-life-after-cancer?_ga=1.252987849.1528396581.1424877086)

<sup>2</sup>Cancer Treatment & Survivorship Facts & Figures, 2014-2015

## YOU DECIDE how to use the cash benefits

Our cash benefits provide you with greater coverage options by allowing you to determine how to use them.



### Finances

Can help protect your HSAs, savings, retirement plans and 401ks from being depleted



### Travel

You can use your cash benefits to help pay for expenses while receiving treatment in another city



### Home

You can use your cash benefits to help pay the mortgage, continue rental payments, or perform needed home repairs for your after care



### Expenses

The lump-sum cash benefit can be used to help pay your family's living expenses such as bills, electricity and gas

## Benefits

### Hospital Confinement and Related Benefits

Continuous Hospital Confinement	Extended Care Facility
Government or Charity Hospital	At Home Nursing
Private Duty Nursing Services	Hospice Care

### Radiation/Chemotherapy and Related Benefits

Radiation/Chemotherapy for Cancer	Blood, Plasma, and Platelets
Medical Imaging	Hematological Drugs

### Surgery and Related Benefits

Surgery	Second Opinion	Anesthesia
Ambulatory Surgical Center	Bone Marrow or Stem Cell Transplant	

### Miscellaneous Benefits

Inpatient Drugs and Medicine	Family Member Lodging and Transportation	
Ambulance	Prosthesis	Non-Local Transportation
Outpatient Lodging	Hair Prosthesis	Physician's Attendance
Physical or Speech Therapy	New or Experimental Treatment	
Nonsurgical External Breast Prosthesis	Anti-Nausea Benefit	
Waiver of Premium (primary insured only)		

### Additional Wellness Benefit

Biopsy for skin cancer	Chest X-ray	Bone Marrow Testing
Echocardiogram	EKG	Colonoscopy
Flexible sigmoidoscopy	Hemoccult stool analysis	
HPV (Human Papillomavirus) Vaccination	Lipid panel (total cholesterol count)	
Mammography, including Breast Ultrasound	Pap Smear, including ThinPrep Pap Test	
Stress test on bike or treadmill	Thermography	
Serum Protein Electrophoresis (test for myeloma)		
Doppler screening for carotids or peripheral vascular disease		
Ultrasound screening for abdominal aortic aneurysms		
Blood tests for triglycerides, CA15-3 (breast cancer), CA125 (ovarian cancer), CEA (colon cancer) and PSA (prostate cancer)		

### Additional Benefits

Cancer Initial Diagnosis Benefit	Intensive Care Benefit
----------------------------------	------------------------

## Access Your Benefits and Claim Filings

Accessing your benefit information using **MyBenefits** has never been easier.

**MyBenefits** is an easy-to-use website that offers you 24/7 access to important information about your benefits. Plus, you can submit and check your claims (including claim history), request your cash benefit to be direct deposited, make changes to personal information, and more.

For use in enrollments situated in: AL, AK, AR, DE, DC, GA, GU, HI, IL, IN, IA, KY, LA, MA, MI, MS, MO, NE, NV, NM, ND, OH, OK, OR, PA, PR, RI, SC, TN, UT, VI, WI, WY

This material is valid as long as information remains current, but in no event later than September 15, 2018. Group Cancer and Specified Disease benefits are provided by policy form GVCP3, or variations thereof.

Coverage is provided by Limited Benefit Supplemental Cancer and Specified Disease Insurance. The policy is not a Medicare Supplement Policy. If eligible for Medicare, review Medicare Supplement Buyer's Guide available from Allstate Benefits. This information highlights some features of the policy but is not the insurance contract. For complete details, contact your Allstate Benefits Agent. This is a brief overview of the benefits available under the Group Voluntary Policy underwritten by American Heritage Life Insurance Company (Home Office, Jacksonville, FL). Details of the insurance, including exclusions, restrictions and other provisions are included in the certificates issued.

The coverage does not constitute comprehensive health insurance coverage (often referred to as "major medical coverage") and does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.



**Allstate**  
BENEFITS

Allstate Benefits is the marketing name used by American Heritage Life Insurance Company, a subsidiary of The Allstate Corporation. ©2015 Allstate Insurance Company. [www.allstate.com](http://www.allstate.com) or [allstatebenefits.com](http://allstatebenefits.com)

# Cancer Insurance (GVCP3)

Group Voluntary Cancer from Allstate Benefits

See attached Important Information About Coverage.

Offered to the employees of: **Lucas County**

## BENEFIT AMOUNTS

	PLAN 1	PLAN 2
<b>HOSPITAL AND RELATED BENEFITS</b>		
Continuous Hospital Confinement (daily)	\$200	\$300
Government or Charity Hospital (daily)	\$200	\$300
Private Duty Nursing Services (daily)	\$200	\$300
Extended Care Facility (daily)	\$200	\$300
At Home Nursing (daily)	\$200	\$300
Hospice Care Center (daily) or Hospice Care Team (per visit)	\$200 \$200	\$300 \$300
<b>RADIATION/CHEMOTHERAPY AND RELATED BENEFITS</b>		
Radiation/Chemotherapy for Cancer <sup>1</sup> (every 12 months)	\$12,800	\$19,200
Blood, Plasma, and Platelets <sup>1</sup> (every 12 months)	\$10,000	\$15,000
Medical Imaging <sup>1</sup>	\$500	\$750
Hematological Drugs <sup>1</sup>	\$200	\$300
<b>SURGERY AND RELATED BENEFITS</b>		
Surgery <sup>2</sup>	\$3,000	\$4,500
Anesthesia (% of surgery)	25%	25%
Ambulatory Surgical Center (daily)	\$500	\$750
Second Opinion	\$400	\$600
Bone Marrow or Stem Cell Transplant		
1. Autologous	\$1,000	\$1,500
2. Non-autologous (cancer or specified disease treatment)	\$2,500	\$3,750
3. Non-autologous (Leukemia)	\$5,000	\$7,500
<b>MISCELLANEOUS BENEFITS</b>		
Inpatient Drugs and Medicine (daily)	\$25	\$25
Physician's Attendance (daily)	\$50	\$50
Ambulance (per confinement)	\$100	\$100
Non-Local Transportation <sup>1</sup> (per trip or mile)	Coach Fare or \$0.40/Mile	Coach Fare or \$0.40/Mile
Outpatient Lodging	\$50	\$50
Family Member Lodging (daily) and Transportation <sup>1</sup> (per trip or mile)	\$50 Coach Fare or \$0.40/Mile	\$50 Coach Fare or \$0.40/Mile
Physical or Speech Therapy (daily)	\$50	\$50
New or Experimental Treatment <sup>3</sup> (every 12 months)	\$5,000	\$5,000
Prosthesis <sup>3</sup>	\$2,000	\$2,000
Hair Prosthesis (every 2 years)	\$25	\$25
Nonsurgical External Breast Prosthesis <sup>1</sup>	\$50	\$50
Anti-Nausea Benefit <sup>1</sup>	\$200	\$200
Waiver of Premium (Employee only)	Yes	Yes
<b>ADDITIONAL BENEFITS</b>		
Cancer Initial Diagnosis (one-time benefit)	\$2,000	\$5,000
Wellness Benefit	\$50	\$75

For Internal Home Office use only

2Hosp; 4Rad; 2Surg; 1Misc; 2Nit; 0ICU; 2Well; 0Prog

3Hosp; 6Rad; 3Surg; 1Misc; 5Nit; 0ICU; 3Well; 0Prog

<sup>1</sup>Pays actual cost up to amount listed. <sup>2</sup>Pays actual charges up to amount listed in certificate Schedule of Surgical Procedures. Amount paid depends on surgery. <sup>3</sup>Pays actual charges up to amount listed.

**PLAN 1 PREMIUMS**

MODE	EE	EE + SP	EE + CH	F
Bi-Weekly	\$10.10	\$15.50	\$14.32	\$19.72

**PLAN 2 PREMIUMS**

MODE	EE	EE + SP	EE + CH	F
Bi-Weekly	\$15.80	\$24.38	\$22.50	\$31.08

EE = Employee; EE + SP = Employee + Spouse; EE + CH = Employee + Child(ren); F = Family



For use in enrollments situated in: OH. This rate insert is part of forms ABJ31043-Flyer and ABJ30590 and is not to be used on its own.

**This material is valid as long as information remains current, but in no event later than December, 1, 2019.** Allstate Benefits is the marketing name used by American Heritage Life Insurance Company (Home Office, Jacksonville, FL), a subsidiary of The Allstate Corporation. ©2016 Allstate Insurance Company. [www.allstate.com](http://www.allstate.com) or [allstatebenefits.com](http://allstatebenefits.com).

**Lucas County**  
**Voluntary Life Benefit Summary**  
**Class 1 - All Eligible Full-Time Employees**

<b>Full-time Employee Requirement</b>	An eligible employee is a full-time permanent employee authorized to work and reside in the United States. Eligible employees must work 20 or more hours per week and cannot be considered a part-time, temporary or seasonal employee. If any eligible employee is not actively at work on the individual effective date, group insurance coverage for that employee will not exist until he/she returns to full-time active work.
<b>Life Amount</b>	A flat amount in \$1,000 increments with a Minimum of \$10,000 and a Maximum of \$500,000 not to exceed 5 times your annual base salary, rounded to the next \$10,000.
<b>Guaranteed Issue Amount</b>	\$250,000
<b>Accidental Death &amp; Dismemberment (AD&amp;D) Principal Sum Amount</b>	A flat amount in \$1,000 increments with a Minimum of \$10,000 and a Maximum of \$500,000 not to exceed 5 times your annual base salary, rounded to the next \$10,000.
<b>Definition of Earnings</b>	Annual base salary only: The amount of coverage will be based upon earnings as last reported in writing to and approved by AUL. In no event will the amount of earnings used to calculate benefits under the AUL contract exceed the lesser of the amount approved by AUL, amount shown in the Employer's payroll records, or for which premium has been paid.
<b>Reduction Schedule</b>	The Life Amount and AD&D Principal Sum will reduce to 45% of the amount shown above when the Employee reaches age 70. See Certificate for further benefit reductions due to age.
<b>Accelerated Life Benefit</b>	The Employee may request payment of 25%, 50%, or 75% of the Life Amount if the Employee is diagnosed with a terminal condition, as defined in the Certificate.
<b>Waiver of Premium</b>	AUL may waive further premium payments for the Employee's Life Amount if the Employee becomes Totally Disabled before age 60 while insured under the Policy, and remains continuously Totally Disabled for 6 months, and submits proof of Total Disability.
<b>Conversion</b>	If the Employee's Life Insurance or a portion of it ceases, the Employee may be entitled to convert his / her policy. The Employee can refer to his or her Certificate for specific details of this provision.
<b>Portability</b>	You may be eligible to apply for continuation of coverage should your coverage terminate. Approval for this benefit will extend your coverage for an additional period of time.

**Guaranteed Increase Benefit (GIB)**

If eligible, you may apply for an additional amount of coverage offered by AUL at each approved scheduled enrollment period without providing Evidence of Insurability. The amount of coverage after the increase can not be greater than the maximum amount of coverage available.

**Life Event Benefit (LEB)**

If eligible and a qualifying Life event has occurred, you may apply for an additional amount of coverage. The amount of coverage after the increase can not be greater than the maximum amount of coverage available.

**Accidental Death & Dismemberment (AD&D)**

While insured under the Policy, if the Employee has an accident which results in a loss or condition specified in the chart below, AUL will pay the amount shown. The loss or condition must occur within 365 days from the date of the accident and AUL must receive acceptable proof of loss or condition.

**Loss Schedule**

## Loss

Life [AD&D Principal Sum]

Both hands or both feet or sight of both eyes [AD&D Principal Sum]

Speech and hearing [AD&D Principal Sum]

One hand and one foot [AD&D Principal Sum]

One hand and sight of one eye [AD&D Principal Sum]

One foot and sight of one eye [AD&D Principal Sum]

Sight of one eye [Half of AD&D Principal Sum]

One hand or one foot [Half of AD&D Principal Sum]

Speech or hearing [Half of AD&D Principal Sum]

Thumb and index finger [Quarter of AD&D Principal Sum]

## Conditions

Quadriplegia or Loss of Use of Upper and Lower Limbs of the Body [AD&D Principal Sum]

Paraplegia or Loss of Use of Both Lower Limbs of the Body [Half of AD&D Principal Sum]

Hemiplegia or Loss of Use of Upper and Lower Limbs on the Same Side of the Body [Half of AD&D Principal]

Monoplegia or Loss of Use of One Limb of the Body [Quarter of AD&D Principal]

Severe Burns [AD&D Principal Sum]

The total amount payable will never exceed the AD&D Principal Sum for all losses or conditions sustained by the Employee.

**Voluntary Dependent Term Life**

## Plan 1

Spouse Amount - A flat amount in \$500 increments with a Minimum of \$5,000 and a Maximum of \$100,000 not to exceed 50% of your Life amount. The spouse Guaranteed Issue amount is \$30,000.

Dependent Child\* - 6 months to age 19, or 25 if full-time student \$10,000

Dependent Child - Live birth to 6 months \$1,000

\*Age and definition of Child(ren) may vary by state.

**Benefit Features Offered for  
Voluntary Term Life and AD&D**

Seat Belt  
Air Bag  
Repatriation  
Spouse/Child Higher Education  
Disappearance  
Exposure  
Spouse/Child Care  
Dependent Spouse Accelerated Life Benefit (ALB)

This information is provided as a Benefit Outline. It is not a part of the insurance policy and does not change or extend American United Life Insurance Company's® liability under the group Policy. Employers may receive either a group Policy or a Certificate of Insurance containing a detailed description of the insurance coverage under the group Policy. If there are any discrepancies between this information and the group Policy, the Policy will prevail.

**Lucas County**  
**Worksite Disability - Long Term Benefit Summary**  
**Class 1 - All eligible full-time employees - Plan 1**

<b>Full-time Employee Requirement</b>	An eligible employee is a full-time permanent employee authorized to work and reside in the United States. Eligible employees must work 20 or more hours per week and cannot be considered a part-time, temporary or seasonal employee. If any eligible employee is not actively at work on the individual effective date, group insurance coverage for that employee will not exist until he/she returns to full-time active work.
<b>Benefit Amount</b>	60% of an Employee's Covered Monthly Earnings to a maximum benefit of \$5,000, then reduced by Other Income Benefits as outlined in the certificate. The minimum monthly benefit is \$100.
<b>Definition of Earnings</b>	Basic monthly earnings only: The amount of coverage will be based upon earnings as last reported in writing to and approved by AUL. In no event will the amount of earnings used to calculate benefits under the AUL contract exceed the lesser of the amount approved by AUL, amount shown in the Employer's payroll records, or for which premium has been paid.
<b>Elimination Period</b>	180 days for injury or 180 days for sickness. This is the period of consecutive days of disability for which no benefit is payable.
<b>Maximum Benefit Duration</b>	2 years to age 70. This is the length of time that an insured Employee may be entitled to benefits if continuously disabled as outlined in the Certificate.
<b>Maternity Coverage</b>	Benefits will be paid the same as any other qualifying disability, subject to any applicable pre-existing condition exclusion.
<b>Total Disability</b>	You are considered disabled if, because of injury or sickness, you cannot perform the the material and substantial duties of your any occupation; you are not working in any occupation and are under the regular attendance of a physician for that injury or sickness.
<b>Partial Disability</b>	A partial disability benefit may be paid, if because of injury or sickness an Employee, while unable to perform every material and substantial duty of his or her any occupation on a full-time basis, is performing at least one of the material and substantial duties of his or her any occupation, or another occupation, on a full or part-time basis, and is earning less than 80% of his or her pre-disability earnings due to the same injury or sickness.
<b>Residual Disability</b>	The elimination period can be met using total disability, partial disability, or a combination of both.

<b>Recurrent Disability</b>	A recurrent disability is the direct result of the injury or sickness that caused a prior disability. This benefit allows claim payments to continue without satisfying a new elimination period if an Employee returns to active full-time work and has a recurrent disability within 30 consecutive days of return to active work.
<b>Pre-Existing Condition Exclusions</b>	The pre-existing period is 3/12. Benefits will not be paid if the Person's disability begins in the first 12 months of coverage; and the disability is caused by, contributed to, or the result of a condition, whether or not that condition is diagnosed at all or is misdiagnosed, for which the Person received medical treatment, consultation, care or services, including diagnostic measures, or was prescribed medicines in the 3 months just prior to the Individual's effective date of insurance.
<b>Portability</b>	You may be eligible to apply for continuation of coverage should your coverage terminate. Approval for this benefit will extend your coverage for an additional period of time.
<b>Special Conditions</b>	Benefits for Disability due to Special Conditions, whether or not benefits were sought because of the condition, will not be payable beyond 12 months as outlined in the contract. Benefit payments for Disabilities due to Special Conditions are cumulative for the lifetime of the contract.
<b>Cost of Living Freeze</b>	Any inflationary increases in other benefit payment(s) (i.e., Social Security) that an Employee may be receiving will not further reduce monthly disability benefits paid under the contract.
<b>Continuation of Coverage During:</b>	FMLA Temporary Lay Off or LOA LOA for Military Service
<b>Additional Benefits:</b>	Return to Work Benefit Survivor Benefit Workplace Modification
<b>Exclusions</b>	This plan may not cover any disability resulting from war, declared or undeclared or any act of war; active participation in a riot; intentionally self-inflicted injuries; commission of an assault or felony.

This information is provided as a Benefit Outline. It is not a part of the insurance policy and does not change or extend American United Life Insurance Company's® liability under the group Policy. Employers may receive either a group Policy or a Certificate of Insurance containing a detailed description of the insurance coverage under the group Policy. If there are any discrepancies between this information and the group Policy, the Policy will prevail.



## Valuable pre-tax benefits with convenient tools

**Why not use pre-tax dollars to pay for medical co-pays, prescriptions, and/or daycare fees, thereby reducing your taxable income and increasing your take-home pay? It's a no-brainer.**

The pre-tax advantages of a Flexible Spending Account (FSA) allow you to save **up to 30%** on your eligible healthcare and/or dependent care expenses every year. Consider how much you spend on these costs for you and your qualified dependents in one year and how much you could save by using pre-tax dollars.

### How it Works

FlexSystem FSA is offered through your employer and is administered by TASC. When you choose to enroll in a FlexSystem **Healthcare FSA** and/or **Dependent Care FSA**, you determine the dollar amount you want to contribute to each account based on your estimated expenses for the upcoming Plan Year. Your contributions will be deducted in equal amounts from each paycheck, **pre-tax**, throughout the Plan Year.

***The more you contribute to these accounts, the more you reduce your taxable gross salary. And with less taxes taken, your take-home pay increases!***

Your total annual Healthcare FSA contribution amount is available immediately at the start of the Plan Year. Dependent Care FSA funds are available up to the current account balance only.

### Online Enrollment and Contributions

Annual FSA contributions are set by your employer, but are limited to the IRS maximums per Plan Year. View current IRS limits at: [www.tasconline.com/benefits-limits/](http://www.tasconline.com/benefits-limits/)

Use our **online tax-savings calculator** to help determine how much you should contribute to each FlexSystem account per year.



### The TASC Card Convenience

Enjoy easy access to your FSA funds with the swipe of a card instead of out-of-pocket spending and requesting a reimbursement!

### Pre-Tax Savings Example

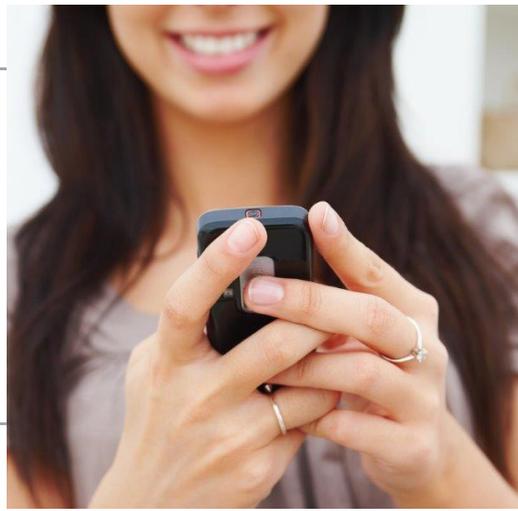
	<u>Without FSA</u>	<u>With FSA</u>
Gross Monthly Pay:	\$3,500	\$3,500
<b>Pre-Tax Contributions</b>		
Medical/Dental Premiums	\$0	-\$125
Medical Expenses	\$0	-\$75
Dependent Care Expenses	\$0	-\$400
<b>TOTAL:</b>	\$0	<b>-\$600</b>
<b>Taxable Monthly Income</b>	<b>\$3,500</b>	<b>\$2,900</b>
Taxes (federal, state, FICA):	-\$968	-\$802
<b>Out-of-pocket Expenses:</b>	<b>-\$600</b>	<b>\$0</b>
<b>Monthly Take-home Pay:</b>	<b>\$1,932</b>	<b>\$2,098</b>

**Net Increase in Take-Home Pay = \$166/mo!**

For illustration only. Actual dollar amounts may vary.

### Carryover puts your mind at ease!

When your employer elects the Carryover option with your Healthcare FSA Plan, up to \$500 of any leftover healthcare funds may be carried over into the next Plan Year with no cost or penalty.



Multiple self-service tools available to easily manage your FlexSystem account(s) and TASC Card transactions:

MyTASC Online: [www.tasconline.com](http://www.tasconline.com)

MyTASC Mobile App: [www.tasconline.com/mobile](http://www.tasconline.com/mobile)

MyTASC Text Messaging (SMS)

## How to Access Your FSA Funds

As eligible expenses are incurred, you have two options to access your available FlexSystem FSA funds:

**1) TASC Benefits Card:** upon enrollment into the Plan, you will receive a TASC Card in the mail, which can be used to pay for eligible expenses at the point of purchase. Simply swipe your TASC Card where MasterCard is accepted.

With smart card technology, the TASC Card automatically pays for and substantiates most eligible expenses without requiring any paperwork.

**2) Request a Reimbursement:** simply submit a request for reimbursement to FlexSystem using one of the following methods:

- Submit via MyTASC Mobile App (free download)
- Submit via MyTASC Text Message (SMS)
- Download Request for Reimbursement form online (paper)

Your reimbursement is direct deposited into your **MyCash account** or a designated bank account. MyCash funds are accessible via your TASC Card to be used for **any** type of purchase or ATM cash withdrawal.

## Eligible Expenses

FlexSystem FSA funds may only be used for eligible expenses under your healthcare FSA and/or dependent care FSA. Some eligible expenses include:

- Medical/dental office visit co-pays
- Dental/Orthodontic care services
- Eye exams and prescription glasses/lenses
- Prescriptions
- Vaccinations
- Daycare Fees

A complete list can be found at [www.irs.gov](http://www.irs.gov) in IRS Publications 502 & 503. Please note insurance premiums are NOT eligible for reimbursement.

## Important Considerations

### ***FSA Funds do not Rollover:***

It is important to be conservative in making elections because any unused funds left in your FSA at the close of the Plan Year are not refundable to you (the exception to this rule is for the Healthcare FSA where funds (up to \$500) may carryover to the next Plan Year Healthcare FSA as elected by your employer). You are urged to take precautionary steps, such as tracking account balances on the FlexSystem website and/or using the Interactive Voice Response System, to avoid having funds remaining in your account at year-end.

### ***Changing Elections During the Plan Year:***

You may change your FSA elections during the Plan Year only if you experience a change of status such as:

- a marriage or divorce
- birth or adoption of a child, or
- a change in employment status

Refer to the *Change of Election Form* (available from your employer) for a complete list of circumstances acceptable for changing elections mid-year.

# Expenses that qualify for reimbursement from FlexSystem

Healthcare FSA | Dependent Care FSA



Below is a partial list of permissible expenses reimbursable through a Flexible Spending Account (FSA) that are incurred by you, your spouse, or qualified dependents. Please note: a Limited Purpose Healthcare FSA only allows dental and vision expenses.

## Medical Expenses

- Acupuncture
- Artificial limbs
- Bandages
- Birth control, contraceptive devices
- Birthing classes/Lamaze – only the mother’s portion (not the coach/spouse) and the class must be only for birthing instruction, not child rearing
- Blood pressure monitor
- Blood sugar test kits/test strips
- Chiropractic therapy/exams/adjustments
- Contact lens and contact lens solutions
- Co-payments
- Crutches (purchased or rented)
- Deductible and co-insurance
- Diabetic supplies
- Eye exams
- Eyeglasses, contacts, or safety glasses, prescription only (warranties are not reimbursable)
- Flu shots
- Hearing aids and hearing aid batteries (warranties are not reimbursable)
- Heating pad
- Incontinence supplies
- Infertility treatments
- Insulin
- Lactation expenses (breast pumps, etc.)
- Laser eye surgery; LASIK
- Legal sterilization
- Medical supplies to treat an injury or illness
- Mileage to and from doctor appointments
- Nasal strips
- Optometrist’s or ophthalmologist’s fees
- Orthopedic inserts
- Physicals
- Physical therapy (as medical treatment)

- Physician’s fee and hospital services
- Pregnancy test
- Prescription drugs and medications
- Psychotherapy, psychiatric and psychological service
- Reading glasses
- Sales tax on eligible expenses
- Services connected with donating an organ
- Sleep apnea services/products (as prescribed)
- Smoking cessation programs
- Treatment for alcoholism or drug dependency
- Vaccinations
- Wrist supports, elastic wraps
- X-ray fees

## OTC Medicines and Drugs

Over-the-counter (OTC) medicines and drugs, except for insulin, require a prescription from your physician to be reimbursable. The prescription will need to be included with each request for reimbursement.

- Bengay, Flexall, pain relieving creams or gels
- Calamine lotion
- Canker/cold sore relievers
- Cold medicines
- Corn removal
- Diaper rash ointment
- GasX, baby gas drops
- Hemorrhoid creams and treatments
- Hydrogen Peroxide or rubbing alcohol
- Indigestion or anti-acid relievers
- Laxatives
- Nicotine patch
- Pain relievers (Tylenol, Advil, Aspirin, etc.)
- Sinus medicines
- Suppositories
- Teething gel
- Wart removal medication

*Continued on next page...*

**For more information regarding FSA expenses, please review IRS Publication 502  
or ask your employer for a copy of your Summary Plan Description (SPD).**

## Dental Expenses

- Braces and orthodontic services
- Cleanings
- Crowns
- Deductibles, co-insurance
- Dental implants
- Dentures, adhesives
- Fillings

## Disability Expenses

- Automobile equipment and installation costs for a disabled person in excess of the cost of an ordinary automobile; device for lifting a mobility impaired person into an automobile
- Braille books/magazines in excess of cost of regular editions
- Note-taker for a hearing impaired child in school
- Seeing eye dog (buying, training, and maintaining)
- Special devices, such as a tape recorder or typewriter for a visually impaired person
- Visual alert system in the home or other items such as a special phone required for a hearing impaired person
- Wheelchair or autoette (cost of operating/maintaining)

## Requiring Additional Documentation

The following expenses are eligible only when incurred to treat a diagnosed medical condition. Such expenses require a **Letter of Medical Necessity** from your physician, containing the medical necessity of the expense, diagnosed condition, onset of condition, and physician's signature.

- Ear plugs
- Massage treatments
- Nursing services for care of a special medical ailment
- Orthopedic shoes (excess cost of ordinary shoes)
- Oxygen equipment and oxygen
- Support hose
- Varicose vein treatment
- Veneers
- Vitamins and supplements
- Wigs (for mental health condition of individual who loses hair because of a disease)

## Dependent Care Expenses

- Fees for licensed day care or adult care facilities
- Before and after school care programs for dependents under age 13
- Amounts paid for services (including babysitters or nursery school) provided in or outside of your home
- Nanny expenses attributed to dependent care
- Nursery school (preschool) fees
- Summer Day Camp – primary purpose must be custodial care and not educational in nature
- Late pick-up fees
- **Does not cover medical costs**; use Healthcare FSA for medical expenses incurred by you or your dependents

## Ineligible Medical Expenses



- Athletic mouth guards
- Chapstick/lip balm
- Contributions to state disability funds
- Cosmetic surgery, dentistry, or other cosmetic procedures
- Cosmetic supplies (makeup, cleansers, moisturizers, etc.)
- Deodorant
- Dental floss
- Diet (cost of special foods as substitute for regular diet)
- Dietary and fiber supplements
- Electrolysis/hair removal
- Exercise equipment and fees
- Eye drops for general comfort
- Eyeglass cases
- Hand sanitizer
- Health club or athletic club membership fees
- Herbal supplements
- Insurance premiums, all types
- Lotions or skin moisturizers
- Marriage counseling
- Maternity clothes
- Mattress
- Medicare premiums
- Medicated shampoos, conditioners, and soaps
- Physical treatment unrelated to specific health problems (massage for general well-being, stress, depression, or chiropractic wellness)
- Safety glasses (non-prescription)
- Sunglasses (non prescription) and sun clips
- Teeth whitening products
- Toiletries
- Toothbrush (includes prescribed electronic) and toothpaste
- Vitamins and supplements for well-being
- Warranties
- Weight loss drugs/programs for general well being