



Making care and benefits easier

Proposal for: ACNA

Introduction

Thank you for the opportunity to offer this proposal to you.

Proposal Presented to

ACNA
14851 Gideon Drive
Woodbridge, VA 22192

SIC Code: 8661

Proposal Presented by

Sun Life

Benefits Quoted

Employee Basic Life; Employee Basic AD&D; Employee Voluntary Life; Employee Voluntary AD&D; Spouse Voluntary Life; Spouse Voluntary AD&D; Child Voluntary Life; Child Voluntary AD&D; Short-Term Disability; Long-Term Disability; Dental and Vision

Proposed Effective Date

August 1, 2023

Things to Know

- This proposal shows a summary of proposed product(s), rates, and underlying assumptions. It is not part of the group policy or an administrative services agreement with Sun Life or its affiliated companies.
- This proposal is valid for 60 days, starting from July 19, 2023, and only for the proposed Effective Date.
- This proposal may include fully insured, nonparticipating coverage that terminates at retirement, unless otherwise noted.
- For fully insured coverages, the rates shown may be subject to recalculation pending a) final enrollment, b) census data, and c) review of any additional data requested in the proposal. Please review the assumptions for information about how the rates were derived.
- For fully insured coverages, we require that you provide a copy of the current carrier's policy or certificate, and for self-funded plans we require your Plan Document at time of sale.

The following notices apply to quotes for fully insured coverage:

Producer Licensing

All Sun Life companies require producers who use insurance quotes for the purpose of soliciting, selling, or negotiating insurance to be licensed both by the state where the prospective client is located and by any state where the solicitation, sale, or negotiation of insurance occurs, if different. This requirement pertains to all forms of solicitation, sale, or negotiation of insurance, including but not limited to solicitation, sale, or negotiation conducted in person or by telephone, by e-mail, by fax, or otherwise.

Producer Compensation

We encourage brokers and their clients to discuss what commission or other compensation may be paid in connection with the purchase of products and services from Sun Life companies. All Sun Life companies may pay the selling broker, agency, or third party administrator for the promotion, sale, and renewal of the products and services offered in this proposal. In addition to our standard compensation arrangements, we may make additional cash payments or reimbursements to selling brokers in recognition of their marketing and distribution activities, persistency levels, and volume of business. For New York-issued cases, producers must comply with the specific compensation disclosure requirements of New York Regulation 194.

Plan and Rates

This proposal may be based on employee census information provided by the employer. Acceptance of the group and final rates will be determined by Sun Life based on actual enrollment and case experience, if required. Terms and conditions of any services agreement or any coverage under a policy may be determined by all required final data and by underwriting rules, minimum participation requirements, and policy provisions in effect on the date coverage begins.

Underwriting Companies

The Sun Life group of companies operates under the "Sun Life" name strictly as a marketing name, and no legal significance is expressed or implied. In the United States and elsewhere, insurance products are offered by members of the Sun Life group that are insurance companies. Sun Life Financial Inc., the publicly traded holding company for the Sun Life group of companies, is not an insurance company and does not guarantee the obligations of these insurance companies. Each insurance company relies on its own financial strength and claims-paying ability.

Life and AD&D

We are pleased to offer Life and AD&D insurance to employers, with the benefits employees want. Here are some highlights:

- **Value-Added Services:** Employers can choose one of the Value-Added Services packages that best fits the needs of their employees. These noninsurance services are included in the price of the Life coverage.
 - **Self Care+:** Offers employees and their families (age 13+) 24/7 access to digital tools such as mindfulness activities, guided journals, blogs, and meditations to help them build resilience and improve their mental health. Service provided by AbleTo and is not insurance.²
 - **Emergency Travel Assistance & ID Theft:** Emergency Travel Assistance provides medical, dental and personal emergency assistance for employees and dependents traveling 100+ miles from home. Identity Theft Protection offers prevention and resolution tools to safeguard data and restore its integrity if it is used fraudulently. These services are provided by Assist America and are not insurance.²
 - **Online Will Preparation & Claimant Support Services:** Online Will Preparation provides step-by-step guidance online to create a legally binding will. Claimant Support Services connect claimants and beneficiaries to professional grief, financial and legal counseling. These services are provided by ComPsych and are not insurance.²
- **Accelerated Benefits:** Terminally ill employees may access a portion of their death benefit while they are alive.
- **Waiver of Premium:** This benefit helps employees maintain important Life coverage when they become Totally Disabled, as defined by the policy, and meet age requirements. Employers can customize the Elimination Period or choose no Elimination Period—a popular choice because it means easy tracking and immediate benefits for eligible employees.
- **Claims Settlement:** Beneficiaries may elect to receive either a complimentary interest-bearing account or a lump-sum payment. Availability may vary by state.
- **Accidental Death & Dismemberment (AD&D):** Protection for covered Accidental Death and covered injuries resulting in Speech/Hearing Loss, Loss of Limb, Loss of Thumb and Index Finger, and Loss of Use of a Limb Due to Quadriplegia, Paraplegia, or Hemiplegia—all with a standard 365-day loss period. Many optional riders can be added, including Seat Belt, Air Bag, Helmet, Business Travel, Bereavement Counseling, and Child and/or Spouse Education. Availability may vary by state.
- **Enrollment Campaigns and Support:** We work with benefits managers to ensure easy enrollment and provide a wide range of tools to help ensure maximum participation at no additional cost.
- **Portability/Continuation:** Allows employees to take their group Life insurance with them (Portability) or continue their Life insurance (Continuation) under the group policy when coverage ends for reasons other than sickness, injury, retirement, or termination of the employer's plan. Employees can apply for portable or continued Term Life coverage without satisfying Evidence of Insurability. Continuation is available in lieu of Portability in states where Portability is not available.
- **Service Guarantees:** We are pleased to offer a Life Service Guarantee, which covers the speed and accuracy of our claims processing as well as how quickly we respond to our customers' phone calls. In addition, we include an overall satisfaction guarantee to ensure that our customers are 100% satisfied with our service. If we do not meet our service standards, the employer will receive a refund via check. Sun Life's maximum liability under this guarantee for any policy year is limited to

Group Life and AD&D coverage is underwritten by Sun Life Assurance Company of Canada
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

the lesser of 3% of the policyholder's annual Life premium or \$5,000. The maximum payment for a breach of any one component is one-third of the maximum liability (lesser of 1% or \$1,667). If a policyholder has more than one line of insurance coverage, the Overall Satisfaction component will be paid only if the service issue arises under this guarantee. Certain limitations apply.

Footnote information is located in the General Disclosures section on the last page of this proposal.

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Basic Life

Plan design and rates

Plan 1

Employee Basic Life and AD&D plan design

Employee Basic Life	
Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
Effective Date	August 1, 2023
	Class 1
Class description	All Eligible Employees
Waiting Period	30 days of employment
Benefit amount	Flat \$100,000
Maximum benefit	\$100,000
Guaranteed Issue amount	\$100,000
Contributions	Noncontributory
Participation requirement	100%

Employee Basic AD&D	
Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
Effective Date	August 1, 2023
	Class 1
Class description	All Eligible Employees
Benefit amount	Flat \$100,000
Maximum benefit	\$100,000
Compulsory coverage	Yes
Contributions	Noncontributory
Participation requirement	100%

Basic Life rates

Coverage	Total employees	Monthly rate	Total estimated monthly volume	Total estimated monthly premium	Total estimated annual premium
Employee Basic Life	215	\$0.380	\$19,700,000	\$7,486	\$89,832
Employee Basic AD&D	215	\$0.030	\$19,700,000	\$591	\$7,092
Total estimated premium				\$8,077	\$96,924
Rate basis: Per \$1,000 of volume					
There could be income tax and ERISA implications if the employer-funded Basic Life rates shown above have been reduced in cost (subsidized) by employee-funded Voluntary Life rates that may also be in this proposal. Subsidized rates can potentially create additional imputed income for some employees (under IRC Section 79) and potentially violate ERISA's fiduciary rules. As a group insurance carrier, Sun Life cannot make this determination for you. We recommend that you consult with your tax consultant and attorney before implementing the Basic and Voluntary Life rates in this proposal.					

Sequence Number: 1

Group Basic Life and AD&D coverage is underwritten by Sun Life Assurance Company of Canada
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Included in plan 1:

- A flat 15% broker commission
- 24-month rate guarantee from the Effective Date
- Employee age reductions: All coverage amounts reduce to 65% at age 65, 50% at age 70.
- Waiver of Premium: For employees with an approved disability prior to age 60, premium is waived until age 65. There is an Elimination Period of 9 months which must be satisfied before the waiver of premium begins. The definition of Total Disability is disabled from any occupation.

Waiver of premium is provided on the following benefits: Employee Basic Life.

- Portability: Coverage may be ported upon termination of active employment.
- Conversion Privilege
- Employee Accelerated Death Benefit of 75% to a maximum of \$500,000.
- A choice of one Value-Added Service: Self Care+, Emergency Travel Assistance & ID Theft, or Online Will Preparation & Claimant Support Services.²
- Coverage will be continued on a premium-paying basis for a period of 1 month during a layoff.
- Coverage will be continued on a premium-paying basis for a period of 1 month during a leave of absence approved by the policyholder.
- Coverage will be continued on a premium-paying basis for a period of 12 months during a period of injury or sickness.
- Earnings definition: Earnings are defined as the current earnings reported by the employer. Earnings include deductions made for pre-tax contributions to a qualified deferred compensation plan, Section 125 plan, or flexible spending account. Earnings do not include commissions, bonuses, overtime, or any other compensation.
- 24-hour AD&D coverage
- Special AD&D benefits:
 - Air Bag
 - Bereavement Counselling
 - Child Care
 - Common Carrier
 - Seat Belt

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Plan 2

Employee Basic Life and AD&D plan design

Employee Basic Life	
Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
Effective Date	August 1, 2023
	Class 1
Class description	All Eligible Employees
Waiting Period	30 days of employment
Benefit amount	Flat \$25,000
Maximum benefit	\$25,000
Guaranteed Issue amount	\$25,000
Contributions	Noncontributory
Participation requirement	100%

Employee Basic AD&D	
Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
Effective Date	August 1, 2023
	Class 1
Class description	All Eligible Employees
Benefit amount	Flat \$25,000
Maximum benefit	\$25,000
Compulsory coverage	Yes
Contributions	Noncontributory
Participation requirement	100%

Basic Life rates

Coverage	Total employees	Monthly rate	Total estimated monthly volume	Total estimated monthly premium	Total estimated annual premium
Employee Basic Life	215	\$0.400	\$4,925,000	\$1,970	\$23,640
Employee Basic AD&D	215	\$0.030	\$4,925,000	\$148	\$1,773
Total estimated premium				\$2,118	\$25,413
Rate basis: Per \$1,000 of volume					
There could be income tax and ERISA implications if the employer-funded Basic Life rates shown above have been reduced in cost (subsidized) by employee-funded Voluntary Life rates that may also be in this proposal. Subsidized rates can potentially create additional imputed income for some employees (under IRC Section 79) and potentially violate ERISA's fiduciary rules. As a group insurance carrier, Sun Life cannot make this determination for you. We recommend that you consult with your tax consultant and attorney before implementing the Basic and Voluntary Life rates in this proposal.					

Sequence Number: 2

Group Basic Life and AD&D coverage is underwritten by Sun Life Assurance Company of Canada
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Included in plan 2:

- A flat 15% broker commission
- 24-month rate guarantee from the Effective Date
- Employee age reductions: All coverage amounts reduce to 65% at age 65, 50% at age 70.
- Waiver of Premium: For employees with an approved disability prior to age 60, premium is waived until age 65. There is an Elimination Period of 9 months which must be satisfied before the waiver of premium begins. The definition of Total Disability is disabled from any occupation.

Waiver of premium is provided on the following benefits: Employee Basic Life.

- Portability: Coverage may be ported upon termination of active employment.
- Conversion Privilege
- Employee Accelerated Death Benefit of 75% to a maximum of \$500,000.
- A choice of one Value-Added Service: Self Care+, Emergency Travel Assistance & ID Theft, or Online Will Preparation & Claimant Support Services.²
- Coverage will be continued on a premium-paying basis for a period of 1 month during a layoff.
- Coverage will be continued on a premium-paying basis for a period of 1 month during a leave of absence approved by the policyholder.
- Coverage will be continued on a premium-paying basis for a period of 12 months during a period of injury or sickness.
- Earnings definition: Earnings are defined as the current earnings reported by the employer. Earnings include deductions made for pre-tax contributions to a qualified deferred compensation plan, Section 125 plan, or flexible spending account. Earnings do not include commissions, bonuses, overtime, or any other compensation.
- 24-hour AD&D coverage
- Special AD&D benefits:
 - Air Bag
 - Bereavement Counselling
 - Child Care
 - Common Carrier
 - Seat Belt

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Plan 3

Employee Basic Life and AD&D plan design

Employee Basic Life	
Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
Effective Date	August 1, 2023
	Class 1
Class description	All Eligible Employees
Waiting Period	30 days of employment
Benefit amount	Flat \$10,000
Maximum benefit	\$10,000
Guaranteed Issue amount	\$10,000
Contributions	Noncontributory
Participation requirement	100%

Employee Basic AD&D	
Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
Effective Date	August 1, 2023
	Class 1
Class description	All Eligible Employees
Benefit amount	Flat \$10,000
Maximum benefit	\$10,000
Compulsory coverage	Yes
Contributions	Noncontributory
Participation requirement	100%

Basic Life rates

Coverage	Total employees	Monthly rate	Total estimated monthly volume	Total estimated monthly premium	Total estimated annual premium
Employee Basic Life	215	\$0.400	\$1,970,000	\$788	\$9,456
Employee Basic AD&D	215	\$0.030	\$1,970,000	\$59	\$709
Total estimated premium				\$847	\$10,165
Rate basis: Per \$1,000 of volume					
There could be income tax and ERISA implications if the employer-funded Basic Life rates shown above have been reduced in cost (subsidized) by employee-funded Voluntary Life rates that may also be in this proposal. Subsidized rates can potentially create additional imputed income for some employees (under IRC Section 79) and potentially violate ERISA's fiduciary rules. As a group insurance carrier, Sun Life cannot make this determination for you. We recommend that you consult with your tax consultant and attorney before implementing the Basic and Voluntary Life rates in this proposal.					

Sequence Number: 3

Group Basic Life and AD&D coverage is underwritten by Sun Life Assurance Company of Canada
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Included in plan 3:

- A flat 15% broker commission
- 24-month rate guarantee from the Effective Date
- Employee age reductions: All coverage amounts reduce to 65% at age 65, 50% at age 70.
- Waiver of Premium: For employees with an approved disability prior to age 60, premium is waived until age 65. There is an Elimination Period of 9 months which must be satisfied before the waiver of premium begins. The definition of Total Disability is disabled from any occupation.

Waiver of premium is provided on the following benefits: Employee Basic Life.

- Portability: Coverage may be ported upon termination of active employment.
- Conversion Privilege
- A choice of one Value-Added Service: Self Care+, Emergency Travel Assistance & ID Theft, or Online Will Preparation & Claimant Support Services.²
- Coverage will be continued on a premium-paying basis for a period of 1 month during a layoff.
- Coverage will be continued on a premium-paying basis for a period of 1 month during a leave of absence approved by the policyholder.
- Coverage will be continued on a premium-paying basis for a period of 12 months during a period of injury or sickness.
- Earnings definition: Earnings are defined as the current earnings reported by the employer. Earnings include deductions made for pre-tax contributions to a qualified deferred compensation plan, Section 125 plan, or flexible spending account. Earnings do not include commissions, bonuses, overtime, or any other compensation.
- 24-hour AD&D coverage
- Special AD&D benefits:
 - Air Bag
 - Bereavement Counselling
 - Child Care
 - Common Carrier
 - Seat Belt

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Voluntary Life

Plan design and rates

Employee Voluntary Life, AD&D, Dependent Voluntary Life, and AD&D plan design

Employee Voluntary Life	
Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
Effective Date	August 1, 2023
	Class 1
Class description	All Eligible Employees
Waiting Period	30 days of employment
Benefit amount	Increments of \$10,000
Maximum benefit	\$200,000 or 5 times annual earnings, whichever is less
Minimum benefit	\$10,000
Guaranteed Issue amount	\$50,000
Participation requirement	20%

Employee Voluntary AD&D	
Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
Effective Date	August 1, 2023
	Class 1
Class description	All Eligible Employees
Benefit amount	Increments of \$10,000
Maximum benefit	\$200,000 or 5 times annual earnings, whichever is less
Minimum benefit	\$10,000
Compulsory coverage	Yes
Employee must elect Voluntary Life to elect Voluntary AD&D	

Spouse Voluntary Life and AD&D	
Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
Effective Date	August 1, 2023
	Class 1
Class description	All Eligible Employees
Spouse benefit amount	Increments of \$5,000
Spouse maximum benefit	\$100,000
Minimum benefit	N/A
Spouse Guaranteed Issue amount	\$25,000
Maximum % of employee coverage	100%
Spouse termination age	N/A
Compulsory AD&D coverage	Yes
Employee must elect Voluntary Life to elect Spouse Voluntary Life / AD&D	

Child Voluntary Life and AD&D	
Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
Effective Date	August 1, 2023

Group Voluntary Life and AD&D coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

	Class 1				
Class description	All Eligible Employees				
	Option 1	Option 2	Option 3	Option 4	Option 5
Child benefit amount	\$1,000	\$2,000	\$4,000	\$5,000	\$10,000
Child maximum benefit	\$1,000	\$2,000	\$4,000	\$5,000	\$10,000
Child Guaranteed Issue amount	Up to the maximum benefit				
Full child benefit begins	6 months				
Child benefit by age	birth to 15 days		\$0		
	15 days to 6 months		\$1,000		
Child eligibility	Unmarried dependent children from 15 days to age 26				
Maximum % of employee coverage	50%				
Compulsory AD&D coverage	Yes				

Employee must elect Voluntary Life to elect Child Voluntary Life / AD&D

Voluntary Life rates

Employee Voluntary Life		
Age band	Eligible employees	Monthly rate
Under age 20	1	\$0.080
20-24	1	\$0.080
25-29	1	\$0.080
30-34	15	\$0.080
35-39	26	\$0.100
40-44	31	\$0.140
45-49	22	\$0.230
50-54	30	\$0.340
55-59	18	\$0.540
60-64	25	\$0.820
65-69	30	\$1.240
70-74	10	\$2.490
75-79	3	\$5.400
80-84	1	\$10.780
85 and over	1	\$21.360
Rate basis: Per \$1,000 of volume		

Spouse Voluntary Life		
Age band	Eligible employees	Monthly rate
Under age 20	1	\$0.080
20-24	1	\$0.080
25-29	1	\$0.080
30-34	15	\$0.080
35-39	26	\$0.100
40-44	31	\$0.140
45-49	22	\$0.230
50-54	30	\$0.340
55-59	18	\$0.540
60-64	25	\$0.820
65-69	30	\$1.240
70-74	10	\$2.490
75-79	3	\$5.400
80-84	1	\$10.780
85 and over	1	\$21.360
Rate basis: Per \$1,000 of volume		

Group Voluntary Life and AD&D coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Coverage	Eligible employees	Monthly rate
Employee Voluntary AD&D	215	\$0.030
Spouse Voluntary AD&D	215	\$0.030
Child Voluntary Life	215	\$0.220
Child Voluntary AD&D	215	\$0.030
Rate basis: Per \$1,000 of volume		
Sequence Number: 4		

Included in this plan:

- A flat 15% broker commission
- 24-month rate guarantee from the Effective Date
- Employee age reductions: None
- Spouse age reductions: None
- Includes ability to increase benefit amount to the next increment annually without Evidence of Insurability.
- Waiver of Premium: For employees with an approved disability prior to age 60, premium is waived until age 65. There is an Elimination Period of 9 months which must be satisfied before the waiver of premium begins. The definition of Total Disability is disabled from any occupation.

Waiver of Premium is provided on the following benefits: Employee Voluntary Life.

- Portability Coverage may be ported upon termination of active employment.
- Conversion Privilege
- Employee Accelerated Death Benefit of 75% to a maximum of \$500,000.
- Coverage will be continued on a premium-paying basis for a period of 1 month during a layoff.
- Coverage will be continued on a premium-paying basis for a period of 1 month during a leave of absence approved by the policyholder.
- Coverage will be continued on a premium-paying basis for a period of 12 months during a period of injury or sickness.
- Earnings definition: Earnings are defined as the current earnings reported by the employer. Earnings include deductions made for pre-tax contributions to a qualified deferred compensation plan, Section 125 plan, or flexible spending account. Earnings do not include commissions, bonuses, overtime, or any other compensation.
- 24-hour AD&D coverage
- Special AD&D benefits:
 - Air Bag
 - Bereavement Counselling
 - Seat Belt

Footnote information is located in the General Disclosures section on the last page of this proposal.

Group Voluntary Life and AD&D coverage is underwritten by Sun Life Assurance Company of Canada
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Assumptions

- Standard Sun Life policy language, as filed in the policyholder's situs state, is offered. No special language or state filings are included unless approved in advance and policy provisions are subject to state requirements and availability.
- Completion and approval of the Group Life Insurance Transition Statement prior to the Effective Date. This statement addresses employees who are not Actively at Work.
- An employee must be Actively at Work on his/her Effective Date for coverage to become effective. If an employee is not Actively at Work on his or her Effective Date, coverage will not become effective until the employee is again Actively at Work.
- If the minimum participation requirement is not met for any contributory or employee paid coverage, the policy provisions, Guaranteed Issue amount, and rates are subject to change.
- Dependents are eligible for coverage only when the employee is insured. Dependent coverage amounts are subject to state requirements.
- Coverage for dependents who are hospital-confined due to illness or injury will be effective on the date they are no longer hospital-confined. Hospital-confined does not apply to a newborn child.
- If AD&D coverage is compulsory, employees who elect Life coverage automatically receive AD&D coverage equal to their Employee Life amount.
- Sun Life requires a final census before the point of sale and reserves the right to re-rate the proposal upon verification of dates of birth, genders, salaries, and occupations.
- Common ownership of the business units.
- Notification of any employer-completed merger or acquisition.
- Evidence of Insurability is required for late entrants, coverage increases, and coverage in excess of the Guaranteed Issue amount.
- For Voluntary Life insurance late entrants may elect the initial increment amount without having to provide Evidence of Insurability (EOI). Existing members may increase coverage by one increment in any year without having to provide EOI, even if the increased coverage exceeds the Guaranteed Issue amount. Other scenarios require Evidence of Insurability to be met.
- Earnings definition will exclude housing and other allowances.
- Earnings definition will exclude housing and other allowances.

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(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Short-Term Disability

We are pleased to offer income replacement coverage with flexible plan designs and Return-to-Work incentives to help employers manage costs. Here are some highlights:

- **Flexible and Fully Insured Plan Designs:** Employers appreciate our flexible Short-Term Disability plan designs, which all include an "own occupation" definition and full maternity coverage. Employers may select from a variety of options: W-2 preparation at no additional cost, employer FICA match, varied benefit durations, and length of Elimination Periods.
- **Claims Management:** Using a team approach, medical, psychiatric, and vocational professionals actively manage Short-Term Disability claims. Employers who buy both Short-Term Disability and Long-Term Disability can also take advantage of our early intervention process.
- **Rehabilitation Services:** We offer this optional benefit through our on-staff specialists. Efforts may include job modification, worksite accommodations, transitional assignments, and other activities reasonably necessary to help employees return to work. For employers who choose this option, claimants who participate in a rehabilitation program approved by Sun Life may receive an additional 10% benefit.
- **Tiered Benefits:** Employers can vary benefits payments over the duration of an employee's disability.
- **Statutory Plans:** We offer statutory plans in New York, New Jersey and Hawaii.
- **Residual Disability Benefits:** This option allows employees to satisfy the Elimination Period by combining days of Total and Partial Disability.
- **Partial Disability Benefits:** We offer multiple options that allow employees to receive benefits when working part time, giving them extra motivation to get back to work as quickly as possible.
- **Survivor Benefit:** This option allows a survivor benefit to be payable in a lump sum to a surviving spouse or eligible child, if an employee dies before the benefit duration ends, was disabled for at least 14 consecutive days, and was eligible to receive Short-Term Disability benefits prior to death.
- **First-Day Hospitalization:** This option helps protect hospitalized employees by providing immediate benefits with no Elimination Period.
- **Service Guarantees:** We are pleased to offer a Short-Term Disability Service Guarantee, which covers the speed and accuracy of our claims processing as well as how quickly we respond to our customers' phone calls. In addition, we include an overall satisfaction guarantee to ensure that our customers are 100% satisfied with our service. If we do not meet our service standards, the employer will receive a refund via check. Sun Life's maximum liability under this guarantee for any policy year is limited to the lesser of 3% of the policyholder's annual Short-Term Disability premium or \$5,000. The maximum payment for a breach of any one component is one-third of the maximum liability (lesser of 1% or \$1,667). If a policyholder has more than one line of insurance coverage, the Overall Satisfaction component will be paid only if the service issue arises under this guarantee. Certain limitations apply.

Group Short-Term Disability coverage is underwritten by Sun Life Assurance Company of Canada
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Short-Term Disability

Plan design and rates

Plan 1

Short-Term Disability plan design

Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
Effective Date	August 1, 2023
	Class 1:
Class description	All Eligible Employees
Waiting Period	30 days of employment
Benefit amount	50%
Maximum weekly benefit	\$1,000
Definition of Disability	loss of duties and loss of earnings required
Injury start date	15 days
Sickness start date	15 days
First-Day Hospitalization	No
Maximum Benefit Period	12 weeks
Partial Disability benefit	Return-to-Work
Zero-Day Residual	No
Pre-Existing Limitation	None
Contributions	Non-contributory
Participation requirement	100%
Employer contribution %	100%

Short-Term Disability Rates

Coverage	Total participating employees	Monthly rate	Total estimated volume	Total estimated monthly premium	Total estimated annual premium
STD	215	\$0.250	\$156,970	\$3,924	\$47,091
Rate basis: Per \$10 of weekly benefit					
Sequence Number: 7					

Short Term Disability ("STD") benefits will be reduced by the amount of state mandated statutory benefits and Other Income that an employee may receive or be eligible to receive. Depending on the amount of the state's statutory benefits, STD coverage may not be appropriate for employees in CA, NY, NJ, HI, and RI. To confirm the impact of such off-sets on the plans quoted here, please discuss the benefits with your broker or your Sun Life Employee Benefits Representative.

Included in plan 1:

- A flat 15% broker commission
- 24-month rate guarantee from the Effective Date
- Disability management services
- Partial Disability benefit
- Employer FICA administration for any taxable benefits not included
- Full maternity coverage
- Nonoccupational coverage

Group Short-Term Disability coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

- Coverage will be continued on a premium-paying basis for a period of 1 month during a layoff.
- Coverage will be continued on a premium-paying basis for a period of 1 month during a leave of absence approved by the policyholder.
- Earnings definition: Earnings are defined as the earnings reported by the employer immediately prior to the first date of disability. Earnings include deductions made for pre-tax contributions to a qualified deferred compensation plan, Section 125 plan, or flexible spending account. Earnings do not include commissions, bonuses, overtime, or any other compensation.

Group Short-Term Disability coverage is underwritten by Sun Life Assurance Company of Canada
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Plan 2

Short-Term Disability plan design

Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
Effective Date	August 1, 2023
	Class 1:
Class description	All Eligible Employees
Waiting Period	30 days of employment
Benefit amount	50%
Maximum weekly benefit	\$1,000
Definition of Disability	loss of duties and loss of earnings required
Injury start date	15 days
Sickness start date	15 days
First-Day Hospitalization	No
Maximum Benefit Period	12 weeks
Partial Disability benefit	Return-to-Work
Zero-Day Residual	No
Pre-Existing Limitation	3/12
Contributions	Contributory
Participation requirement	15%
Employer contribution %	0%

Short-Term Disability Rates

Age band	Eligible employees	Monthly rate
Under age 25	2	\$0.560
25-29	1	\$0.780
30-34	15	\$0.580
35-39	26	\$0.370
40-44	31	\$0.300
45-49	22	\$0.330
50-54	30	\$0.390
55-59	18	\$0.540
60-64	25	\$0.790
65-69	30	\$0.750
70 and over	15	\$0.610
Rate basis: Per \$10 of weekly benefit		

Sequence Number: 8

Short Term Disability (“STD”) benefits will be reduced by the amount of state mandated statutory benefits and Other Income that an employee may receive or be eligible to receive. Depending on the amount of the state’s statutory benefits, STD coverage may not be appropriate for employees in CA, NY, NJ, HI, and RI. To confirm the impact of such off-sets on the plans quoted here, please discuss the benefits with your broker or your Sun Life Employee Benefits Representative.

Included in plan 2:

- A flat 15% broker commission
- 24-month rate guarantee from the Effective Date
- Disability management services
- Partial Disability benefit
- Employer FICA administration for any taxable benefits not included

Group Short-Term Disability coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

- Full maternity coverage
- Nonoccupational coverage
- Coverage will be continued on a premium-paying basis for a period of 1 month during a layoff.
- Coverage will be continued on a premium-paying basis for a period of 1 month during a leave of absence approved by the policyholder.
- Earnings definition: Earnings are defined as the earnings reported by the employer immediately prior to the first date of disability. Earnings include deductions made for pre-tax contributions to a qualified deferred compensation plan, Section 125 plan, or flexible spending account. Earnings do not include commissions, bonuses, overtime, or any other compensation.

Group Short-Term Disability coverage is underwritten by Sun Life Assurance Company of Canada
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Assumptions

- Standard Sun Life policy language, as filed in the policyholder's situs state, is offered. No special language or state filings are included unless approved in advance. Policy provisions are subject to state requirements and availability.
- An employee must be Actively at Work on his/her Effective Date for coverage to become effective. If an employee is not Actively at Work on his or her Effective Date, coverage will not become effective until the employee is again Actively at Work.
- This plan does not replace the statutory disability plan in any state.
- Employees in states with statutory STD plans are covered by those statutory plans, and any STD benefit payable will be offset by those statutory benefits. We reserve the right to re-rate if this assumption proves incorrect.
- The employer has not opted out of Workers' Compensation coverage.
- Sun Life requires a final census, which includes participation information for contributory/voluntary benefits, before the point of sale and reserves the right to re-rate the proposal upon verification of dates of birth, genders, salaries, individual benefit elections, and occupations.
- Common ownership of the business units.
- All noncontributory plan designs assume that the employer pays the entire premium and that all benefits are fully taxable.
- Notification of any employer-completed merger or acquisition.
- Earnings definition will exclude housing and other allowances.

Group Short-Term Disability coverage is underwritten by Sun Life Assurance Company of Canada
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Long-Term Disability

We are pleased to offer income replacement benefits that take into consideration disability management through cost-containment and rehabilitation. Here are some highlights:

- **Retro Disability Benefits®:** In states that allow it, this innovative feature gives extra benefits to employees with serious LTD claims. It's designed to help employees who are continuously hospitalized for 14 days or more at the onset of Total Disability and who complete the Elimination Period. When we pay the first Total Disability benefit, we will retroactively pay that claimant his or her LTD benefits from the first day the claimant was deemed Totally Disabled. This benefit is paid in a lump-sum amount, and there are no offsets.
- **Innovative Return-to-Work Incentives:**
 - We offer Zero-Day Residual benefits with no requirement of Total Disability before benefits are payable. Our Return-to-Work incentive allows combined earnings of up to 100% during the Return-to-Work period.
 - For customers who choose our Rehabilitation option, claimants who participate in a rehabilitation program approved by Sun Life receive an additional 10% benefit.
- **Rehabilitation Services:** We provide comprehensive Rehabilitation Services through our on-staff specialists. We offer customized Return-to-Work plans; physical, recreational, and vocational therapy; job search assistance; and financial assistance for worksite accommodations and other expenses.
- **Service Guarantees:** We are pleased to offer an LTD Service Guarantee, which covers the speed and accuracy of our claims processing as well as how quickly we respond to our customers' phone calls. In addition, we include an overall satisfaction guarantee to ensure that our customers are 100% satisfied with our service. If we do not meet our service standards, the employer will receive a refund via check. Sun Life's maximum liability under this guarantee for any policy year is limited to the lesser of 3% of the policyholder's annual LTD premium or \$5,000. The maximum payment for a breach of any one component is one-third of the maximum liability (lesser of 1% or \$1,667). If a policyholder has more than one line of insurance coverage, the Overall Satisfaction component will be paid only if the service issue arises under this guarantee. Certain limitations apply.
- **An Effective Social Security Assistance Program:** We provide this service for all claimants.
- **Integrated Life Waiver of Premium Processing:** When the LTD plan is offered in combination with our Group Life coverage, we automatically start the Life waiver claim review process for claimants. This service helps make it easier for claimants to apply for Life Waiver of Premium benefits.
- **A Wide Range of Optional Features:** Valuable options include a COBRA Continuation Premium Reimbursement benefit, a Child Care Expense benefit, a Child Continuing Education Expense benefit, Cost of Living Adjustments, a Retirement Contribution benefit, an Assisted Living benefit, a Survivor Benefit, and alternate funding (for larger employers).

Group Long-Term Disability coverage is underwritten by Sun Life Assurance Company of Canada
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Long-Term Disability

Plan design and rates

Plan 1

Long-Term Disability plan design

Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
Effective Date	August 1, 2023
	Class 1
Class description	All Eligible Employees
Waiting Period	30 days of employment
Maximum benefit %	50% of monthly earnings
Maximum monthly benefit	\$7,500
Elimination Period	90 days
Definition of Disability	24 months own occupation; loss of duties and loss of earnings required
Earnings Test	80% during the own occupation period and 50% during the any occupation period
Minimum benefit	\$100
Contributions	Noncontributory
Participation requirement	100%
Employer contribution %	100%

Long-Term Disability rates

Coverage	Total participating employees	Monthly rate	Total estimated volume	Total estimated monthly premium	Total estimated annual premium
LTD	215	\$0.380	\$1,438,518	\$5,466	\$65,596
Rate basis: Per \$100 of monthly covered payroll					

Sequence Number: 5

Included in plan 1:

- A flat 15% broker commission
- 24-month rate guarantee from the Effective Date
- Benefit duration of SSNRA
- Direct integration
- Family Social Security offset
- Partial Disability benefit
- 12-month Return-to-Work incentive
- Zero-Day Residual
- Retro Disability Benefit®: pays a lump-sum amount equal to the employee's gross monthly benefit times the number of months in the Elimination Period if Total Disability required continuous Hospital Confinement for at least 14 consecutive days at the onset of Total Disability. Total Disability must remain continuous throughout the Elimination Period, and the benefit is not subject to Other Income offsets.
- 3-month lump-sum gross Survivor Benefit
- 3/12 pre-existing condition exclusion

Group Long-Term Disability coverage is underwritten by Sun Life Assurance Company of Canada
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

- 24-month mental/nervous limitation
- 24-month drug/alcohol limitation
- Voluntary rehabilitation provision
- Rehabilitation program provides additional 10% benefit
- Reasonable Accommodation benefit of up to \$5,000
- 15 trial work days during the Elimination Period
- Employer FICA administration for any taxable benefits
- Coverage will be continued on a premium-paying basis for a period of 1 month during a layoff.
- Coverage will be continued on a premium-paying basis for a period of 1 month during a leave of absence approved by the policyholder.
- Earnings definition: Earnings are defined as the earnings reported by the employer immediately prior to the first date of disability. Earnings include deductions made for pre-tax contributions to a qualified deferred compensation plan, Section 125 plan, or flexible spending account. Earnings do not include commissions, bonuses, overtime, or any other compensation.

Group Long-Term Disability coverage is underwritten by Sun Life Assurance Company of Canada
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Plan 2

Long-Term Disability plan design

Eligible employees	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 30 hours per week
Effective Date	August 1, 2023
	Class 1
Class description	All Eligible Employees
Waiting Period	30 days of employment
Maximum benefit %	50% of monthly earnings
Maximum monthly benefit	\$7,500
Elimination Period	90 days
Definition of Disability	24 months own occupation; loss of duties and loss of earnings required
Earnings Test	80% during the own occupation period and 50% during the any occupation period
Minimum benefit	\$100
Contributions	Contributory
Participation requirement	15%
Employer contribution %	0%

Long-Term Disability rates

Age band	Eligible employees	Monthly rate
Under age 25	2	\$0.140
25-29	1	\$0.270
30-34	15	\$0.340
35-39	26	\$0.540
40-44	31	\$0.780
45-49	22	\$0.970
50-54	30	\$1.190
55-59	18	\$1.380
60-64	25	\$1.720
65-69	30	\$1.380
70 and over	15	\$0.730

Rate basis: Per \$100 of monthly covered payroll

Sequence Number: 6

Included in plan 2:

- A flat 15% broker commission
- 24-month rate guarantee from the Effective Date
- Benefit duration of SSNRA
- Direct integration
- Family Social Security offset
- Partial Disability benefit
- 12-month Return-to-Work incentive
- Zero-Day Residual
- Retro Disability Benefit®: pays a lump-sum amount equal to the employee's gross monthly benefit times the number of months in the Elimination Period if Total Disability required continuous Hospital Confinement for at least 14 consecutive days at the onset of Total Disability. Total Disability must remain continuous throughout the Elimination Period, and the benefit is not subject to Other Income offsets.
- 3-month lump-sum gross Survivor Benefit
- 3/12 pre-existing condition exclusion

Group Long-Term Disability coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

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- 24-month mental/nervous limitation
- 24-month drug/alcohol limitation
- Voluntary rehabilitation provision
- Rehabilitation program provides additional 10% benefit
- Reasonable Accommodation benefit of up to \$5,000
- 15 trial work days during the Elimination Period
- Employer FICA administration for any taxable benefits not included
- Coverage will be continued on a premium-paying basis for a period of 1 month during a layoff.
- Coverage will be continued on a premium-paying basis for a period of 1 month during a leave of absence approved by the policyholder.
- Earnings definition: Earnings are defined as the earnings reported by the employer immediately prior to the first date of disability. Earnings include deductions made for pre-tax contributions to a qualified deferred compensation plan, Section 125 plan, or flexible spending account. Earnings do not include commissions, bonuses, overtime, or any other compensation.

Group Long-Term Disability coverage is underwritten by Sun Life Assurance Company of Canada
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Assumptions

- Standard Sun Life contractual language, as filed in the policyholder's situs state, is offered. No special language or state filings are included unless approved in advance. Policy provisions are subject to state requirements and availability.
- An employee must be Actively at Work on his/her Effective Date for coverage to become effective. If an employee is not Actively at Work on his or her Effective Date, coverage will not become effective until the employee is again Actively at Work.
- Employees in states with statutory STD plans are covered by those statutory plans, and any LTD benefit payable will be offset by those statutory benefits. We reserve the right to re-rate if this assumption proves incorrect.
- The employer has not opted out of Workers' Compensation coverage.
- Sun Life requires a final census, which includes participation information for contributory/voluntary benefits, before the point of sale and reserves the right to re-rate the proposal upon verification of dates of birth, genders, salaries, individual benefit elections, and occupations.
- Common ownership of the business units.
- Notification of any employer-completed merger or acquisition.
- All noncontributory plan designs assume the employer pays the entire premium and that all benefits are fully taxable.
- Earnings definition will exclude housing and other allowances.

Group Long-Term Disability coverage is underwritten by Sun Life Assurance Company of Canada
(Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Group Dental

We are pleased to offer comprehensive PPO plans and flexible features that can be easily paired to meet your group's dental needs. Here are the highlights:

- **Flexible Plan Designs:** Employers can customize our Passive PPO, Active PPO, and/or Maximum Allowable Charge (MAC) plans to meet their needs.* Offer two plans for a Dual Choice benefit. Include optional features—like orthodontia coverage—for a more robust offering. Adjust benefit waiting periods, deductibles, and some procedure types to suit your employees and your bottom line.
- **Voluntary Dental:** Once a plan design is selected, employers can choose to offer the plan at 100% employee paid for a truly voluntary plan. All voluntary plans are equipped with a voluntary enrollment strategy to improve participation in the plan. Participation requirements apply.
- **Administrative Services Only (ASO) Dental:** An Administrative Services Only (ASO) plan offers the cost advantages of self-funding while providing the same claims processing, payment, reporting and other administrative services found in a fully insured plan. Dental ASO is an administrative service provided to employer sponsored, self-insured dental plans. It is not insurance.
- **Sun Life Dental Network®:** Our Dental plans offer one of the nation's largest PPO **networks**¹. With strong provider penetration and quality assurance controls, it's easy for employees to receive quality dental care from a network dentist near home or work.
- **Lifetime of Smiles®:** We know oral health leads to overall health. That's why we built a program to encourage preventive care with optional benefits, such as:
 - Preventive Max Waiver® – routine dental care does not count towards the annual maximum
 - Preventive Rewards – members can get additional annual maximum dollars the next year based on their paid claims for preventive services
 - RollMax – unused annual maximum dollars can rollover to the next year
- **Robust Online Services:** Employers with Sun Life Dental have access to Sun Life Connect, our user-friendly portal for online plan administration. Your employees can create a Sun Life account to view Explanation of Benefits, find a dentist, learn about dental insurance, read about dental health, and more.
- **Great Service, Guaranteed:** We are dedicated to providing our customers with prompt, responsive customer service. To prove it, we offer a money-back service guarantee that covers the speed and accuracy of our claims processing as well as how quickly we respond to our customers' phone calls. In addition, we include an overall satisfaction guarantee to ensure that our customers are 100% satisfied with our service. If we do not meet our service standards, the employer will receive a refund via check. Sun Life's maximum liability under this guarantee for any policy year is limited to the lesser of 3% of the policyholder's annual Dental premium or \$5,000. The maximum payment for a breach of any one component is one-third of the maximum liability (lesser of 1% or \$1,667). If a policyholder has more than one line of insurance coverage, the Overall Satisfaction component will be paid only if the service issue arises under this guarantee. Certain limitations apply.

1. Zelis Network Analytics data as of January 2022 and based on unique dentist count. Sun Life's dental networks include its affiliate, Dental Health Alliance, L.L.C.® (DHA), and dentists under access arrangements with other dental networks. Nationwide counts are state level totals.

*Product offerings may not be available in all states and may vary depending on state laws and regulations.

Group insurance policies are underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01 and 16-DEN-C-01.

Group Dental

Plan 1

Class

All Eligible Employees

Plan design and rates

Plan design summary

Dental plan overview	
Eligible Employees:	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 20 hours per week
Effective Date:	August 1, 2023
Plan type	PPO
Dental PPO Network	Sun Life Dental Network SM
In-Network Reimbursement	Sun Life Dental Network SM
Out-of-Network Reimbursement	90th Percentile of the Usual and Customary Charge
Orthodontic coverage (Type IV)	This plan includes Child Only Orthodontic coverage. A person must be covered under a Dental Plan to be eligible for Orthodontic coverage
Dependent Coverage Children	Children to age 26
Open enrollment at Issue and each Annual Enrollment	Yes
Employee coverage contributions	Employee pays for a portion or all of the cost of Employee coverage
Dependent coverage contributions	Employee pays for a portion or all of the cost of Dependent coverage

The listed coinsurance percentages shown below represent the portion of Sun Life's allowable charge for which the plan will be responsible. Network providers agree to accept the network's allowable charge for covered services as payment in full. If covered employees or their eligible dependents receive services from a non-network provider, Sun Life will apply the coinsurance percentages shown below to 90th Percentile of the usual and customary charge for covered services and they will be responsible for the difference up to the provider's charge.

Calendar Year Deductible

Procedure Type	In-Network Deductible	Out-of-Network Deductible
Type I Preventive Services	Not applicable	
Type II Basic Services	\$50 individual / \$150 family	\$50 individual / \$150 family
Type III Major Services		
Type IV Ortho Services	Not applicable	

Deductible values are combined between In-Network and Out-of-Network.

Coinsurance

	In-Network	Out-of-Network
Type I Preventive Services	100%	100%
Type II Basic Services	80%	80%
Type III Major Services	50%	50%
Type IV Ortho Services	50%	50%

Benefit Waiting Periods

- A Late Entrant Benefit Waiting Period of 6 months for Type II Basic Restorations, 12 months for all other Type II Basic Services, and 12 months for Type III Major Services will apply to employees who enroll in this dental plan more than 31 days after becoming eligible.
- A Late Entrant Benefit Waiting Period of 12 months for Type IV Orthodontic Services will apply to employees who enroll in this dental plan more than 31 days after becoming eligible.

Calendar Year Maximum Benefit

	In-Network	Out-of-Network
Types I, II and III (Preventive, Basic and Major) Services	\$1,000 per person	\$1,000 per person
Type IV Ortho Services	\$1,000 lifetime per child under age 26	\$1,000 lifetime per child under age 26

Covered expenses

Type I Preventive covered dental expenses	Coverage limitations
Oral Evaluations	2 in any 12 consecutive months
Dental Prophylaxis (Cleanings)	2 per 12 months - frequency combined with Periodontal Maintenance and is limited to 4 in any 12 month consecutive period
Fluoride Treatments	Covered Persons under age 14 1 in any 6 consecutive months
Sealants	Covered Persons under age 14 Once per tooth per 36 consecutive months on permanent first and second molars
Bite-Wing X-Rays	1 in 12 consecutive months
Type II Basic covered dental expenses	Coverage limitations
Full Mouth X-Rays	1 in 60 consecutive months
Palliative Treatment	Paid as a separate benefit only if no treatment, except x-rays, was rendered during the visit
Amalgam Restorations	Once per tooth surface in any 24 consecutive months
Composite and Silicate Restorations	Once per tooth surface in any 24 consecutive months (Anterior and Posterior teeth)
Space Maintainers	Covered Persons under age 19 Once per tooth in any 3 year period
Type III Major covered dental expenses	Coverage limitations
Inlays and Onlays	Covered if tooth cannot be restored by fillings Once per tooth in any 10 years period
Crowns	Covered if tooth cannot be restored by filling or other means Once per tooth in any 10 years period
Crown Buildup	Once per 10 years
Full or Partial Dentures	Once in any 10 years
Fixed Bridges	Once in any 10 years
Periodontal Maintenance	Periodontal Maintenance following active Periodontal Therapy - 1 time in 3 consecutive months. The number of Dental Prophylaxis and Periodontal Maintenance is combined and is limited to 4 in any 12 consecutive month period.
Periodontics (Non-Surgical): Scaling and Root Planing	Once per 36 consecutive months per area of the mouth
Surgical Periodontics	Once per 36 consecutive months per area of the mouth
Endodontics: Root Canal Therapy	Root Canal Therapy is limited to 1 time per tooth in any consecutive 24 months period
Oral Surgery: Surgical Extraction of Erupted and Impacted Teeth	Multiple surgical services on 1 area of the mouth will be based on the most inclusive procedure
General Anesthesia	Benefits payable as a separate expense only when required for the surgical extraction of an impacted tooth
Surgical Implants	Once per 10 years

Type IV Orthodontic covered expenses	Coverage limitations
Orthodontic Treatment	Orthodontic treatment is limited to the Dependent Children or student age listed above

Dental rates and premium

	Dental and Orthodontia monthly rate
Employee only	\$28.56
Employee + spouse	\$56.02
Employee + child(ren)	\$83.24
Employee + Family	\$110.70

For illustration purposes, the total employees shown for each plan is based on data provided to us. Actual employee count will vary at final enrollment.

Sequence Number: 10

Included in plan 1:

- A Flat 10% broker commission
- 24-month rate guarantee from the Effective Date
- Rates assume 215 eligible employees, with 76 participating or 35.3% participation. Upon sale, quoted rates and benefits may be adjusted based on achieved participation levels
- Sun Life reserves the right to adjust rates if final participation is more than 10% different than the participation shown here
- Rates assume this is the only dental plan being offered to employees in this class.

Group Dental

Plan 2

Class

All Eligible Employees

Plan design and rates

Plan design summary

Dental plan overview	
Eligible Employees:	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 20 hours per week
Effective Date:	August 1, 2023
Plan type	PPO
Dental PPO Network	Sun Life Dental Network SM
In-Network Reimbursement	Sun Life Dental Network SM
Out-of-Network Reimbursement	90th Percentile of the Usual and Customary Charge
Orthodontic coverage (Type IV)	Not included
Dependent Coverage Children	Children to age 26
Open enrollment at Issue and each Annual Enrollment	Yes
Employee coverage contributions	Employee pays for a portion or all of the cost of Employee coverage
Dependent coverage contributions	Employee pays for a portion or all of the cost of Dependent coverage

The listed coinsurance percentages shown below represent the portion of Sun Life's allowable charge for which the plan will be responsible. Network providers agree to accept the network's allowable charge for covered services as payment in full. If covered employees or their eligible dependents receive services from a non-network provider, Sun Life will apply the coinsurance percentages shown below to 90th Percentile of the usual and customary charge for covered services and they will be responsible for the difference up to the provider's charge.

Calendar Year Deductible

Procedure Type	In-Network Deductible	Out-of-Network Deductible
Type I Preventive Services	Not applicable	
Type II Basic Services	\$50 individual / \$150 family	\$50 individual / \$150 family
Type III Major Services		
Type IV Ortho Services	Not applicable	

Deductible values are combined between In-Network and Out-of-Network.

Coinsurance

	In-Network	Out-of-Network
Type I Preventive Services	100%	100%
Type II Basic Services	80%	80%
Type III Major Services	50%	50%

Benefit Waiting Periods

- A Late Entrant Benefit Waiting Period of 6 months for Type II Basic Restorations, 12 months for all other Type II Basic Services, and 12 months for Type III Major Services will apply to employees who enroll in this dental plan more than 31 days after becoming eligible.

Calendar Year Maximum Benefit

	In-Network	Out-of-Network
Types I, II and III (Preventive, Basic and Major) Services	\$750 per person	\$750 per person

Covered expenses

Type I Preventive covered dental expenses	Coverage limitations
Oral Evaluations	2 in any 12 consecutive months
Dental Prophylaxis (Cleanings)	2 per 12 months - frequency combined with Periodontal Maintenance and is limited to 4 in any 12 month consecutive period
Fluoride Treatments	Covered Persons under age 14 1 in any 6 consecutive months
Sealants	Covered Persons under age 14 Once per tooth per 36 consecutive months on permanent first and second molars
Bite-Wing X-Rays	1 in 12 consecutive months
Type II Basic covered dental expenses	Coverage limitations
Full Mouth X-Rays	1 in 60 consecutive months
Palliative Treatment	Paid as a separate benefit only if no treatment, except x-rays, was rendered during the visit
Amalgam Restorations	Once per tooth surface in any 24 consecutive months
Composite and Silicate Restorations	Once per tooth surface in any 24 consecutive months (Anterior and Posterior teeth)
Space Maintainers	Covered Persons under age 19 Once per tooth in any 3 year period
Type III Major covered dental expenses	Coverage limitations
Inlays and Onlays	Covered if tooth cannot be restored by fillings Once per tooth in any 10 years period
Crowns	Covered if tooth cannot be restored by filling or other means Once per tooth in any 10 years period
Crown Buildup	Once per 10 years
Full or Partial Dentures	Once in any 10 years
Fixed Bridges	Once in any 10 years
Periodontal Maintenance	Periodontal Maintenance following active Periodontal Therapy - 1 time in 3 consecutive months. The number of Dental Prophylaxis and Periodontal Maintenance is combined and is limited to 4 in any 12 consecutive month period.
Periodontics (Non-Surgical): Scaling and Root Planing	Once per 36 consecutive months per area of the mouth
Surgical Periodontics	Once per 36 consecutive months per area of the mouth
Endodontics: Root Canal Therapy	Root Canal Therapy is limited to 1 time per tooth in any consecutive 24 months period
Oral Surgery: Surgical Extraction of Erupted and Impacted Teeth	Multiple surgical services on 1 area of the mouth will be based on the most inclusive procedure
General Anesthesia	Benefits payable as a separate expense only when required for the surgical extraction of an impacted tooth
Surgical Implants	Once per 10 years

Dental rates and premium

	Dental monthly rate
Employee only	\$26.54
Employee + spouse	\$52.07
Employee + child(ren)	\$74.89
Employee + Family	\$100.42

For illustration purposes, the total employees shown for each plan is based on data provided to us. Actual employee count will vary at final enrollment.

Sequence Number: 11

Included in plan 2:

- A Flat 10% broker commission
- 24-month rate guarantee from the Effective Date
- Rates assume 215 eligible employees, with 76 participating or 35.3% participation. Upon sale, quoted rates and benefits may be adjusted based on achieved participation levels
- Sun Life reserves the right to adjust rates if final participation is more than 10% different than the participation shown here
- Rates assume this is the only dental plan being offered to employees in this class.

Group Dental

Plan 3

Class

All Eligible Employees

Plan design and rates

Plan design summary

Dental plan overview	
Eligible Employees:	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 20 hours per week
Effective Date:	August 1, 2023
Plan type	PPO
Dental PPO Network	Sun Life Dental Network SM
In-Network Reimbursement	Sun Life Dental Network SM
Out-of-Network Reimbursement	90th Percentile of the Usual and Customary Charge
Orthodontic coverage (Type IV)	This plan includes Child Only Orthodontic coverage. A person must be covered under a Dental Plan to be eligible for Orthodontic coverage
Dependent Coverage Children	Children to age 26
Open enrollment at Issue and each Annual Enrollment	Yes
Employee coverage contributions	Employee pays for a portion or all of the cost of Employee coverage
Dependent coverage contributions	Employee pays for a portion or all of the cost of Dependent coverage

The listed coinsurance percentages shown below represent the portion of Sun Life's allowable charge for which the plan will be responsible. Network providers agree to accept the network's allowable charge for covered services as payment in full. If covered employees or their eligible dependents receive services from a non-network provider, Sun Life will apply the coinsurance percentages shown below to 90th Percentile of the usual and customary charge for covered services and they will be responsible for the difference up to the provider's charge.

Calendar Year Deductible

Procedure Type	In-Network Deductible	Out-of-Network Deductible
Type I Preventive Services	Not applicable	
Type II Basic Services	\$50 individual / \$150 family	\$50 individual / \$150 family
Type III Major Services		
Type IV Ortho Services	Not applicable	

Deductible values are combined between In-Network and Out-of-Network.

Coinsurance

	In-Network	Out-of-Network
Type I Preventive Services	100%	100%
Type II Basic Services	80%	80%
Type III Major Services	50%	50%
Type IV Ortho Services	50%	50%

Benefit Waiting Periods

- A Late Entrant Benefit Waiting Period of 6 months for Type II Basic Restorations, 12 months for all other Type II Basic Services, and 12 months for Type III Major Services will apply to employees who enroll in this dental plan more than 31 days after becoming eligible.
- A Late Entrant Benefit Waiting Period of 12 months for Type IV Orthodontic Services will apply to employees who enroll in this dental plan more than 31 days after becoming eligible.

Calendar Year Maximum Benefit

	In-Network	Out-of-Network
Types I, II and III (Preventive, Basic and Major) Services	\$1,000 per person	\$1,000 per person
Type IV Ortho Services	\$1,000 lifetime per child under age 26	\$1,000 lifetime per child under age 26

This plan includes Preventive Max Waiver®, which makes regular dental checkups easy by not counting Type I Preventive expenses toward the annual plan maximum. This leaves more coverage for employees and their covered dependents when they need it most, encouraging employees to maintain good oral health with routine care.

Covered expenses

Type I Preventive covered dental expenses	Coverage limitations
Oral Evaluations	2 in any 12 consecutive months
Dental Prophylaxis (Cleanings)	2 per 12 months - frequency combined with Periodontal Maintenance and is limited to 4 in any 12 month consecutive period
Fluoride Treatments	Covered Persons under age 14 1 in any 6 consecutive months
Sealants	Covered Persons under age 14 Once per tooth per 36 consecutive months on permanent first and second molars
Bite-Wing X-Rays	1 in 12 consecutive months
Type II Basic covered dental expenses	Coverage limitations
Full Mouth X-Rays	1 in 60 consecutive months
Palliative Treatment	Paid as a separate benefit only if no treatment, except x-rays, was rendered during the visit
Amalgam Restorations	Once per tooth surface in any 24 consecutive months
Composite and Silicate Restorations	Once per tooth surface in any 24 consecutive months (Anterior and Posterior teeth)
Space Maintainers	Covered Persons under age 19 Once per tooth in any 3 year period
Type III Major covered dental expenses	Coverage limitations
Inlays and Onlays	Covered if tooth cannot be restored by fillings Once per tooth in any 10 years period
Crowns	Covered if tooth cannot be restored by filling or other means Once per tooth in any 10 years period
Crown Buildup	Once per 10 years
Full or Partial Dentures	Once in any 10 years
Fixed Bridges	Once in any 10 years
Periodontal Maintenance	Periodontal Maintenance following active Periodontal Therapy - 1 time in 3 consecutive months. The number of Dental Prophylaxis and Periodontal Maintenance is combined and is limited to 4 in any 12 consecutive month period.
Periodontics (Non-Surgical): Scaling and Root Planing	Once per 36 consecutive months per area of the mouth
Surgical Periodontics	Once per 36 consecutive months per area of the mouth
Endodontics: Root Canal Therapy	Root Canal Therapy is limited to 1 time per tooth in any consecutive 24 months period
Oral Surgery: Surgical Extraction of Erupted and Impacted Teeth	Multiple surgical services on 1 area of the mouth will be based on the most inclusive procedure
General Anesthesia	Benefits payable as a separate expense only when required for the surgical extraction of an impacted tooth
Surgical Implants	Once per 10 years

Type IV Orthodontic covered expenses	Coverage limitations
Orthodontic Treatment	Orthodontic treatment is limited to the Dependent Children or student age listed above

Dental rates and premium

	Dental and Orthodontia monthly rate
Employee only	\$30.54
Employee + spouse	\$59.91
Employee + child(ren)	\$87.37
Employee + Family	\$116.74

For illustration purposes, the total employees shown for each plan is based on data provided to us. Actual employee count will vary at final enrollment.

Sequence Number: 12

Included in plan 3:

- A Flat 10% broker commission
- 24-month rate guarantee from the Effective Date
- Rates assume 215 eligible employees, with 76 participating or 35.3% participation. Upon sale, quoted rates and benefits may be adjusted based on achieved participation levels
- Sun Life reserves the right to adjust rates if final participation is more than 10% different than the participation shown here
- Rates assume this is the only dental plan being offered to employees in this class.

Group Dental

Plan 4

Class

All Eligible Employees

Plan design and rates

Plan design summary

Dental plan overview	
Eligible Employees:	All Full-Time United States Employees working in the United States who are scheduled to work a minimum of 20 hours per week
Effective Date:	August 1, 2023
Plan type	PPO
Dental PPO Network	Sun Life Dental Network SM
In-Network Reimbursement	Sun Life Dental Network SM
Out-of-Network Reimbursement	90th Percentile of the Usual and Customary Charge
Orthodontic coverage (Type IV)	This plan includes Child Only Orthodontic coverage. A person must be covered under a Dental Plan to be eligible for Orthodontic coverage
Dependent Coverage Children	Children to age 26
Open enrollment at Issue and each Annual Enrollment	Yes
Employee coverage contributions	Employee pays for a portion or all of the cost of Employee coverage
Dependent coverage contributions	Employee pays for a portion or all of the cost of Dependent coverage

The listed coinsurance percentages shown below represent the portion of Sun Life's allowable charge for which the plan will be responsible. Network providers agree to accept the network's allowable charge for covered services as payment in full. If covered employees or their eligible dependents receive services from a non-network provider, Sun Life will apply the coinsurance percentages shown below to 90th Percentile of the usual and customary charge for covered services and they will be responsible for the difference up to the provider's charge.

Calendar Year Deductible

Procedure Type	In-Network Deductible	Out-of-Network Deductible
Type I Preventive Services	Not applicable	
Type II Basic Services	\$50 individual / \$150 family	\$50 individual / \$150 family
Type III Major Services		
Type IV Ortho Services	Not applicable	

Deductible values are combined between In-Network and Out-of-Network.

Coinsurance

	In-Network	Out-of-Network
Type I Preventive Services	100%	100%
Type II Basic Services	80%	80%
Type III Major Services	50%	50%
Type IV Ortho Services	50%	50%

Benefit Waiting Periods

- A Late Entrant Benefit Waiting Period of 6 months for Type II Basic Restorations, 12 months for all other Type II Basic Services, and 12 months for Type III Major Services will apply to employees who enroll in this dental plan more than 31 days after becoming eligible.
- A Late Entrant Benefit Waiting Period of 12 months for Type IV Orthodontic Services will apply to employees who enroll in this dental plan more than 31 days after becoming eligible.

Calendar Year Maximum Benefit

	In-Network	Out-of-Network
Types I, II and III (Preventive, Basic and Major) Services	\$1,500 per person	\$1,500 per person
Type IV Ortho Services	\$1,500 lifetime per child under age 26	\$1,500 lifetime per child under age 26

Covered expenses

Type I Preventive covered dental expenses	Coverage limitations
Oral Evaluations	2 in any 12 consecutive months
Dental Prophylaxis (Cleanings)	2 per 12 months - frequency combined with Periodontal Maintenance and is limited to 4 in any 12 month consecutive period
Fluoride Treatments	Covered Persons under age 14 1 in any 6 consecutive months
Sealants	Covered Persons under age 14 Once per tooth per 36 consecutive months on permanent first and second molars
Bite-Wing X-Rays	1 in 12 consecutive months
Type II Basic covered dental expenses	Coverage limitations
Full Mouth X-Rays	1 in 60 consecutive months
Palliative Treatment	Paid as a separate benefit only if no treatment, except x-rays, was rendered during the visit
Amalgam Restorations	Once per tooth surface in any 24 consecutive months
Composite and Silicate Restorations	Once per tooth surface in any 24 consecutive months (Anterior and Posterior teeth)
Space Maintainers	Covered Persons under age 19 Once per tooth in any 3 year period
Type III Major covered dental expenses	Coverage limitations
Inlays and Onlays	Covered if tooth cannot be restored by fillings Once per tooth in any 10 years period
Crowns	Covered if tooth cannot be restored by filling or other means Once per tooth in any 10 years period
Crown Buildup	Once per 10 years
Full or Partial Dentures	Once in any 10 years
Fixed Bridges	Once in any 10 years
Periodontal Maintenance	Periodontal Maintenance following active Periodontal Therapy - 1 time in 3 consecutive months. The number of Dental Prophylaxis and Periodontal Maintenance is combined and is limited to 4 in any 12 consecutive month period.
Periodontics (Non-Surgical): Scaling and Root Planing	Once per 36 consecutive months per area of the mouth
Surgical Periodontics	Once per 36 consecutive months per area of the mouth
Endodontics: Root Canal Therapy	Root Canal Therapy is limited to 1 time per tooth in any consecutive 24 months period
Oral Surgery: Surgical Extraction of Erupted and Impacted Teeth	Multiple surgical services on 1 area of the mouth will be based on the most inclusive procedure
General Anesthesia	Benefits payable as a separate expense only when required for the surgical extraction of an impacted tooth
Surgical Implants	Once per 10 years

Type IV Orthodontic covered expenses	Coverage limitations
Orthodontic Treatment	Orthodontic treatment is limited to the Dependent Children or student age listed above

Dental rates and premium

	Dental and Orthodontia monthly rate
Employee only	\$32.31
Employee + spouse	\$63.38
Employee + child(ren)	\$97.49
Employee + Family	\$128.56

For illustration purposes, the total employees shown for each plan is based on data provided to us. Actual employee count will vary at final enrollment.

Sequence Number: 13

Included in plan 4:

- A Flat 10% broker commission
- 24-month rate guarantee from the Effective Date
- Rates assume 215 eligible employees, with 76 participating or 35.3% participation. Upon sale, quoted rates and benefits may be adjusted based on achieved participation levels
- Sun Life reserves the right to adjust rates if final participation is more than 10% different than the participation shown here
- Rates assume this is the only dental plan being offered to employees in this class.

Assumptions

- Prior dental plan certificates are required.
- Rates available with a minimum participation of 20% of eligible employees (10 life minimum).
- A minimum of 5 children units are required for orthodontia coverage.
- Assumes direct employer-employee relationship.
- Sun Life is assumed to be the sole provider of dental insurance to the employer named in this proposal.
- Notification of any employer-completed merger or acquisition.
- Standard Sun Life policy language, as filed in the policyholder's situs state, is offered. No special language or state filings are included unless approved in advance and policy provisions are subject to state requirements and availability.
- An employee must be Actively at Work on his/her Effective Date for coverage to become effective. If an employee is not Actively at Work on his or her Effective Date, coverage will not become effective until the employee is again Actively at Work. Continuity of coverage may apply for takeover plans.
- Common ownership of the business units.
- Sun Life requires a final census, which includes participation information for contributory/voluntary benefits, before the point of sale and reserves the right to re-rate the proposal upon verification of dates of birth, genders, salaries, individual benefit elections, and occupations.
- If post-enrollment review shows that the group did not meet all of the underwriting requirements, we reserve the right to re-rate retroactive to the Effective Date or terminate the contract.
- This quote is provided based on information provided with the proposal request. It is intended for informational purposes and is not an offer to contract. The Employer may apply for the group dental insurance shown in this proposal. If the application is accepted by Sun Life, the final rates and benefits will be based on the enrollment census and the verification of the information provided with the rate request.
- Rates assume the group does not currently have dental coverage with Sun Life. However, if the group is currently covered under a Sun Life plan, the rates quoted in this proposal are not valid, and the renewal rates will apply instead. Please contact your Sun Life representative for more information about your renewal rates.

This dental plan does not provide coverage for pediatric oral health services that satisfies the requirements for "minimum essential coverage" as defined by the Patient Protection and Affordable Care Act. ("PPACA").

Group Vision

We are pleased to offer Vision plans and flexible benefits that can be easily paired to meet your group's vision needs. Here are the highlights:

- **Multiple Plan Designs¹:** Employers can select from three different plans to meet their needs.
 - **Plan 1** – Coverage for an eye exam and discounts for materials
 - **Plan 2** – Employer coverage for an eye exam and an option for employees to purchase coverage for materials
 - **Plan 3** – Coverage for an eye exam and materials
- **Voluntary Vision:** Once a plan design is selected, employers can choose to offer the plan at 100% employee paid for a truly voluntary plan. All voluntary plans are equipped with a voluntary enrollment strategy to improve participation in the plan. Participation requirements apply.
- **Easy to Use:** No ID cards or claim forms are necessary
- **Nation's Largest Network:** Your plan comes with access to the largest network² of private-practice eyecare doctors in the U.S. through VSP®. With strong provider penetration and quality assurance controls, it's easy for employees to receive quality vision care.
- **Comprehensive Eye Exam Included:** A comprehensive eye exam is important because VSP doctors can detect signs for other health conditions such as diabetes and high blood pressure.
- **Laser Vision Correction:** Discounts are included with each of our plan options so employees can take advantage of laser surgery to correct farsightedness, nearsightedness, presbyopia or astigmatism.
- **Robust Online Services:** Employers with Sun Life Vision have access to Sun Life Connect, our user friendly portal for online plan administration. Your employees can create a Sun Life account to view explanation of benefits, find an eye care provider, learn about vision insurance, read about vision health, and more.
- **Benefit Tools:** Our mobile app provides members on the go access to find a vision provider, view their vision plan information, claims history and more. This mobile app is available for iOS and Android.

¹ Product offerings may not be available in all states and may vary depending on state laws and regulations.

² Information based on network analysis performed by Zelis as of April, 2022

Group Vision coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Group Vision

All Eligible Employees

Plan design and rates

Plan 3 design summary

Vision Plan Overview	
Eligible Employees	All Full-Time United States Employees working in the United States Who Are Scheduled To Work A Minimum Of 20 Hours Per Week
Effective Date	August 1, 2023
Plan Type	Plan 3
Locating a VSP doctor	A listing is available at vsp.com or by calling 1.800.877.7195
Out-of-Network Providers	Members will receive a lesser benefit and should contact VSP at 1.800.877.7195 for more details.
Dependent Coverage Children	Children to age 26
Annual Enrollment Period	This plan includes an annual enrollment period, which provides an opportunity for late applicants to join the plan and allows for benefit changes.
Employee Coverage Contributions	Employee pays for a portion or all of the cost of Employee coverage
Dependent Coverage Contributions	Employee pays for a portion or all of the cost of Dependent coverage

Group Vision coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Plan 3 Covered Expenses

Vision Insurance Schedule - Full Service			
Benefit	Frequency	In-Network Member Cost	Out-of-Network Benefit
Exam Services WellVision Exam®	1 per 12 months	\$10	Up to \$45
Laser Vision Correction Discount	Once per eye per lifetime	<ul style="list-style-type: none"> Average 15% off the regular price or 5% off the promotional price. Discounts only available from contracted facilities. 	N/A
Lenses Single Lined Bifocal Lined Trifocal Lenticular Necessary Contacts	1 per 12 months	\$25 (lenses and frame)	Up to \$30 Up to \$50 Up to \$60 Up to \$100 Up to \$210
Lens Enhancements Standard progressive Premium progressive Custom progressive		No cost \$95 - \$105 copay \$150 - \$175 copay Average savings of 20-25% on other lens enhancements	N/A
Frames <i>Includes a wide selection of frames at Walmart®.</i>	1 per 24 months	<ul style="list-style-type: none"> \$150 for the frame of your choice and 20% off the amount over your allowance \$80 allowance at Costco®* 	Up to \$70
Elective Contact Lenses <i>Contact lenses are in place of lenses and frame.</i>	1 per 12 months	<ul style="list-style-type: none"> Up to \$60 / 15% savings for your contact lens exam (fitting and evaluation) \$150 for contact lenses 	Up to \$105
Additional Glasses and Sunglasses Discount	20% off additional glasses and sunglasses, including lens options, from the same VSP doctor on the same day as your exam. Or get 20% off from any VSP doctor within 12 months of your last exam.		N/A
Coverage with Retail Providers	*Coverage with retail providers may be different. Check with Costco® and Walmart® for VSP member pricing. The Costco allowance is equivalent to the allowance at preferred providers and other retail providers.		

Group Vision coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Vision Rates and Premium

	Vision monthly rate
Employee only	\$8.64
Employee + spouse	\$17.28
Employee + child(ren)	\$19.01
Employee, spouse + child(ren)	\$27.64

Sequence Number: 9

For illustration purposes, the total employee shown for each plan is based on data provided to us. Actual employee will vary at final enrollment.

Rates assume 215 eligible employees, with 43 participating or 20% participation. Upon sale, quoted rates and benefits may be adjusted based on achieved participation levels.

Sun Life reserves the right to adjust rates if final participation is more than 10% different from the participation provided at quote.

Included in this Plan:

- A flat 10% broker commission
- 24-month rate guarantee from the Effective Date
- The rates quoted are based on the information provided to us at the time of proposal and reflect the risk presented and benefits requested at that time. Any change in our risk or any change in the benefits requested may result in a change of premium rates, a change in the plan offered, or a withdrawal of the proposal.

Group Vision coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

Assumptions

- A minimum of 20% participation or 2 employees is required at point of sale. If the enrollment of this group drops below 2 employees this proposal is not valid.
- This fully insured plan will replace any VSP discount plan currently offered by Sun Life.
- Claim forms are not required for in-network vision providers.
- Assumes direct employer-employee relationship.
- If Experience is provided, any plan changes within the experience period must be disclosed at the time of quoting.
- Sun Life is assumed to be the sole provider of vision insurance to the employer named in this proposal.
- Notification of any employer-completed merger or acquisition.
- Standard Sun Life policy language, as filed in the policyholder's situs state, is offered. No special language or state filings are included unless approved in advance and policy provisions are subject to state requirements and availability.
- An employee must be Actively at Work on his/her Effective Date for coverage to become effective. If an employee is not Actively at Work on his or her Effective Date, coverage will not become effective until the employee is again Actively at Work. Continuity of coverage may apply for takeover plans.
- Common ownership of the business units.
- Sun Life requires a final census, which includes participation information for contributory/voluntary benefits, before the point of sale and reserves the right to re-rate the proposal upon verification of dates of birth, genders, salaries, individual benefit elections, and occupations.
- If post-enrollment review shows that the group did not meet all of the underwriting requirements, we reserve the right to re-rate retroactive to the Effective Date or terminate the contract.
- The rates quoted are based on the information provided to us at the time of proposal and reflect the risk presented and benefits requested at that time. Any change in our risk or any change in the benefits requested may result in a change of premium rates, a change in the plan offered, or a withdrawal of the proposal.
- This quote is provided based on information provided with the proposal request. It is intended for informational purposes and is not an offer to contract. The Employer may apply for the group vision insurance shown in this proposal. If the application is accepted by Sun Life, the final rates and benefits will be based on the enrollment census and the verification of the information provided with the rate request.
- Rates assume the group does not currently have vision coverage with Sun Life. However, if the group is currently covered under a Sun Life plan, the rates quoted in this proposal are not valid, and the renewal rates will apply instead. Please contact your Sun Life representative for more information about your renewal rates.

This vision plan does not provide coverage for pediatric vision health services that satisfies the requirements for “minimum essential coverage” as defined by the Patient Protection and Affordable Care Act. (“PPACA”).

Group Vision coverage is underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01.

MEET MAXWELL: A new offering through Sun Life

Sun Life is excited to provide access to Maxwell Health, an easy-to-use technology platform that makes managing employee benefits simple and effective.

Why Maxwell? You get:

- Access to technology for year-round benefits and HR simplification
- Ease of paperless administration for all of your client's benefits – plus, it's easy to add new voluntary benefits without the headache of eligibility and enrollment management
- Intuitive employee enrollment experience and convenient access to benefits information via web and mobile
- Access to the Marketplace, a curated suite of lifestyle and financial benefits that can be easily implemented through the Maxwell platform



What does it cost?

Starts at \$4.50 per employee, per month (PEPM)*

Placing additional Sun Life benefits can lower the PEPM fee - even to **\$0.****

That includes:

- Full-service implementation and renewal on the technology platform and with Sun Life
- EDI connection with your medical carrier
- EDI connections for all Sun Life insurance products
- EDI connections for other non-medical carriers' products
- Training and support during onboarding, and ongoing

*Discounted prices are not available in NY and WA.

**The PEPM fee is separate from insurance premiums, which may include administrative charges related to use of the platform. Pricing and access to the platform are dependent upon a signed broker agreement being in place.

*Additional charges to apply for: groups with 26-49 employees, one-to-one or telephonic enrollment support. This advertisement is not approved for use in New York or Washington.

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Take your benefits to the next level with Sun Life and Maxwell:
info.maxwellhealth.com/sun-life

*Additional charges to apply for: groups with 26-49 employees, one-to-one or telephonic enrollment support. This advertisement is not approved for use in New York or Washington.

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Disclosures

Policy Disclosures

Life and AD&D

The group policy, which is described in this proposal, may include exclusions. Exclusions may prevent any benefits from being payable based on certain circumstances. For life insurance, subject to state variations, these circumstances may include suicide, and for AD&D insurance, subject to state variations, they may include intentionally self-inflicted injuries, war, active participation in a riot, committing or attempting to commit a criminal act, injury sustained from any aviation activities (other than riding as a fare-paying passenger), bodily or mental infirmity or disease of any kind, infection unless due to an accidental cut or wound, voluntary use of any controlled substance, or operation of any motorized vehicle while intoxicated.

The Accelerated Benefit is not long term care insurance. It will reduce the total amount of your life insurance benefit payable under the Policy by the amount of the accelerated payment. Receipt of an Accelerated Benefit may be taxable; you should consult your tax advisor for specific advice. Receipt of an Accelerated Benefit may affect your eligibility for public assistance programs.

The above material is provided for informational purposes only, and the exclusions may vary by policy issue state. For a complete list of exclusions, please refer to the policy documents.

Short-Term Disability

The group policy, which is described in this proposal, may include limitations and exclusions.

Limitations may limit the amount of benefits payable or exclude benefits under certain circumstances. These circumstances may include any period the employee is not under the regular and continuing care of a physician providing appropriate treatment by means of examination and testing in accordance with the disabling condition, or any period during which the employee fails to submit to a medical examination as requested by Sun Life.

Exclusions may prevent any benefits from being payable based on certain circumstances. These circumstances may include disabilities arising from self-inflicted injuries, war, active participation in a riot, committing or attempting to commit a criminal act, work-related injuries, illnesses or a pre-existing condition.

(A pre-existing condition is defined as a condition for which, during the look back period prior to the employee's Effective Date of insurance or in some cases the Effective Date of an increase in coverage, the employee received medical treatment, consultation, care, or services, including diagnostic measures, or took prescribed drugs or medicines.)

The above material is provided for informational purposes only, and the exclusions and limitations may vary by policy issue state. For a complete list of exclusions and limitations, please refer to the policy documents.

Long-Term Disability

The group policy, which is described in this proposal, may include limitations and exclusions.

Limitations may limit the amount of benefits payable for certain conditions, such as mental illness or drug- and alcohol-related illnesses. They may also outline circumstances under which no benefits are payable, such as when the employee is not under the regular and continuing care of a physician providing appropriate treatment by means of examination and testing in accordance with the disabling condition, any period during which the

employee fails to submit to a medical examination as requested by Sun Life, or any period the employee is incarcerated

Exclusions may prevent any benefits from being payable based on certain circumstances. These circumstances may include disabilities arising from self-inflicted injuries, war, active participation in a riot, committing or attempting to commit a criminal act or a pre-existing condition. (A pre-existing condition is defined as a condition for which, during the lookback period prior to the employee's Effective Date of insurance or in some cases the Effective Date of an increase in coverage, the employee received medical treatment, consultation, care, or services, including diagnostic measures, or took prescribed drugs or medicines.)

The above material is provided for informational purposes only, and the exclusions and limitations may vary by policy issue state. For a complete list of exclusions and limitations, please refer to the policy documents.

Dental Limitations and Exclusions

The group policy, which is described in this proposal, may include exclusions. Exclusions may prevent expenses from being covered based on certain circumstances. The following expenses may not be covered:

- procedures not performed by a licensed dentist
- procedures not listed as covered dental expenses
- dental care for injuries that are work-related, self-inflicted, or not caused by an accident
- orthognathic surgery
- dental care resulting from active participation in a riot or commission of a felony
- experimental treatment, oral hygiene, plaque-control programs, and dietary instruction
- dental care for injuries sustained as a result of war or act of war
- charges for pulp caps
- charges for pulpal therapy
- charges for stainless steel crowns
- charges for fluoride treatments
- charges for sealants
- charges for space maintainers
- dental expenses incurred while coverage is not in force
- charges for care, treatment, services, or supplies to the extent that any benefit is provided by Medicare
- charges not customarily made when there is no insurance or charges for which there is no legal obligation to pay
- charges for failure to keep appointments
- replacement or repair of lost, stolen, or damaged prosthetic or orthodontic appliance
- additional services, such as orthodontia and/or surgical implants, are not covered, unless specifically listed under covered services.
- charges for diagnostic services and treatment of jaw joint problems, such as temporomandibular joint disorders, by any method unless specifically covered under the Certificate.

Other limitations that are plan specific may apply. Please review the Design & Rates section for information on the specific limitations associated to each plan. Other exclusions may apply, please see your certificate for a complete list.

GDOT-6208

Vision

Exclusions

Covered vision expenses do not include, and no benefits are provided for the following:

- Orthoptics or vision training and any associated supplemental testing.
- Plano lenses (lenses with refractive correction of less than + .50 diopter)
- Two pairs of glasses, in lieu of bifocals.
- Replacement of lenses and frames furnished under the Policy which are lost or broken, except at the normal intervals when services are otherwise available.
- Medical or surgical treatment of the eyes.
- Services and/or materials not shown as covered vision expenses in the Benefit Highlights or Covered Vision Benefits.
- Replacement of lost or damaged contact lenses, except at the normal intervals when services are otherwise available.
- Contact lens insurance policies or service agreements.
- Refitting of contact lenses after the initial (90-day) fitting period.
- Additional office visits associated with contact lens pathology.
- Contact lens modification, polishing or cleaning.
- Services associated with CRT or Orthokeratology.

Limitations

- In no event will coverage exceed the lesser of the actual cost of the examination or materials or the limits of coverage shown in the Benefit Highlights.
- The allowance for lenses shown in the Benefits Highlights is for two lenses. If only one lens is needed, coverage will be 50% of the allowance shown for two lenses.
- Benefits will not be payable for replacement of lost or broken materials until the next eligible benefit period.
- The policy is designed to cover visually necessary materials rather than cosmetic materials. When the insured selects any of the following extras, the policy will pay the basic cost of the allowed lenses, and the insured will pay the additional costs for the options.
 - Optional cosmetic processes.
 - Anti-reflective coating.
 - Color coating.
 - Mirror coating.
 - Blended lenses.
 - Cosmetic lenses.

- Laminated lenses.
- Oversize lenses.
- Progressive lenses.
- Photochromic lenses; tinted lenses except Pink #1 and Pink #2.
- UV (ultraviolet) protected lenses.
- A frame that costs more than the plan allowance.
- Contact lenses (except as noted in the Benefit Highlights).

GVISOT-6211

General Disclosures

1. For current financial ratings, please visit www.sunlife.com.

The Sun Life group of companies operates under the “Sun Life” name strictly as a marketing name, and no legal significance is expressed or implied. In the United States and elsewhere, insurance products are offered by members of the Sun Life group that are insurance companies. Sun Life Financial Inc., the publicly traded holding company for the Sun Life group of companies, is not an insurance company and does not guarantee the obligations of these insurance companies. Each insurance company relies on its own financial strength and claims-paying ability.

2. Value-added services are not insurance, are offered only on specific lines of coverage, and carry a separate charge, which is added to the cost of the insurance. The cost is included in the total amount billed. Self Care+ is provided by AbleTo. Emergency Travel Assistance is provided by Assist America®. Identity Theft Protection is provided by SecurAssist®, an Assist America program. ComPsych® is a registered trade mark of ComPsych Corporation. The entities that provide the value-added services are not subcontractors of Sun Life and Sun Life is not responsible or liable for the care, services, or advice provided by them. Sun Life reserves the right to discontinue any of the Services at any time. Employers who provide group insurance coverage and make available value added services within an I.R.C. Section 125 cafeteria plan should consult a tax professional to determine whether those services are Qualified Benefits for Section 125 plans.

Service guarantees: If we do not meet the terms of a guarantee, a policyholder may request in writing a service guarantee review. Sun Life will determine whether it failed to meet the guarantee and whether a payment is made. If the request is approved, payment will be made by check during the policy year, as long as the policy remains in force during this time. Sun Life’s maximum liability under a guarantee for any policy year is limited to the lesser of 3% of the policyholder’s annual premium or \$5,000 for each line of coverage. The maximum payment for a breach of any one component of a guarantee is one-third of the maximum liability (lesser of 1% or \$1,667). If a policyholder has more than one line of insurance coverage, the Overall Satisfaction component will be paid under the guarantee under which the service issue arises. Please note the Service Guarantees apply to Life, STD (including ASO), LTD and Dental (including ASO). For ASO contracts, service guarantee payments will be based on the annual service fee. Service Guarantees are not available for Stop Loss, Accident, Critical Illness, Cancer, Hospital Indemnity or Gap.

Group insurance policies are underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) in all states, except New York, under Policy Form Series 93P-LH, 15-GP-01, 98P-ADD, 07-SL REV 7-12, 07P-LH-PT/07C-LH-PT, 01P-ADD-PT/01C-ADD-PT, GP-A, GC-A, 12-GP-01, 16-DEN-C-01, 12-DI-C-01, 16-DI-C-01, 13-SD-C-01, 12-AC-C-01, 16-AC-C-01, 16-ACPort-C-01, 13-ADD-C-01, 15-ADD-C-01, 12-GPPort-P-01, 13-ADDPort-C-01, 12-STDPort-C-01, ACPort-C-01, 13-SDPort-C-01, 16-SD-C-01, 16-SDPort-C-01, 16-CAN-C-01, 16-CANPort-C-01, 15-LF-C-01, 15-LFPort-C-01, 16-VIS-C-01, TDBPOLICY-2006, TDI-POLICY, 20-HI-C-01, 12-GPPort-P-01, 20-HIPort-C-01, 21-PFML-GP-01-CT and 20-PFML-GP-01-MA. In New York, group insurance policies are underwritten by Sun Life and Health Insurance Company (U.S.) (Lansing, MI) under Policy Form Series 15-GP-01, 13-GP-LF-01, 13-LF-C-01, 13-GP-LH-01, 13-ADD-C-01, 12-DI-C-01, 13-LTD-C-01, 13-STD-C-01, 06P-NY-DBL, 06P-NY-DBL-R-PFL, 07-NYSL REV 7-12, GC-A, GP-A, 12-GP-SD-01, 13-SD-C-01, 12-GP-01, 12-AC-C-01, 12-GPPort-01, 13-LFPort-C-01, 13-ADDPort-C-01, 15-LF-GP-01, 15-SD-GP-01, 12-STDPort-C-01, 12-ACPort-C-01 and 13-SDPort-C-01. Prepaid dental products are provided and administered by Sun Life Assurance Company of Canada (SLOC) under Form Series BDC-GDSA, PDC, and are provided by prepaid dental companies, affiliated with SLOC, under Form Series BDC-GDSA, UDC-CA-GA06-UDC, UDC-CA-GA06-89, FB-NJ-0281, UDC-09-GDSA-TX, PDC in certain states except New York. Prepaid dental companies are Denticare of Alabama, Inc., United Dental Care of Arizona, Inc., UDC Dental California, Inc., United Dental Care of Colorado, Inc., Union Security DentalCare of Georgia, Inc., United Dental Care of Missouri, Inc., Union Security DentalCare of New Jersey, Inc., United Dental Care of New Mexico, Inc., UDC Ohio, Inc., United Dental Care of Texas, Inc., and United Dental Care of Utah, Inc. In New York, prepaid dental products are provided and administered by Sun Life and Health Insurance Company (U.S.) (SLHIC) (Lansing, MI) under Form Series BDC-GDSA-NY. Product offerings may not be available in all states and may vary depending on state laws and regulations.

This coverage does not constitute comprehensive health insurance (often referred to as “major medical coverage”) and does not satisfy the requirement for Minimum Essential Coverage under the Affordable Care Act.

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