Important information about your new benefits plan

For employees of: University of North Alabama

SYMETRA®
RETIREMENT | BENEFITS | LIFE

Let’s talk about your benefits

- Basic life and long-term disability insurance - Symetra
- Supplemental life insurance - Symetra
- Other Supplemental Policies
  - Cancer (Allstate)
  - Vision (VSP)
  - Short-term disability (Dearborn National)
  - NEW carrier - Hospital (Symetra)
  - NEW carrier - Accident (Symetra)
  - NEW offering - Critical Illness (Symetra)
- Additional benefits (complimentary through Symetra)

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Can your family afford to lose your income?

Group Life Insurance
Group Long-Term Disability Insurance

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Protection for your family's financial future

If your family lost you as a provider, could they continue paying their financial obligations?

Mortgage

Car payments

College savings

Did you know?

On average, Americans have just 26% of the life insurance they need.[1]

[1]"What can we do about Under-Insurance in the USA?" Atidot. Published January 2019, https://www.atidot.com/underinsurance-report-2018.

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Group Life/AD&D and Long-Term Disability Insurance

Protection for your family's financial future

- **Life insurance**
  - Pays a benefit to your beneficiary in the event of your death
  - Option to keep benefits if you leave the company

- **Accidental death and dismemberment (AD&D) insurance**
  - Pays a benefit in the event of a death or loss of limb due to accident

- **Long-term disability:**
  - Replaces a portion of your income if you are too sick or injured to work.
  - Ends when you return to work or reach Social Security Normal Retirement Age

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Basic Life/AD&D and Long-Term Disability Insurance

The University funds a life and LTD policy for each full-time, regular employee

	Benefit Amount	Option to keep benefits if you leave the company
Employer Paid		
Basic Life	1.5 times base salary	✓

	Benefit Amount	Maximum Duration	Benefits Begin
Employer Paid			
Long-Term Disability	Pays 60% of **monthly** income, up to the benefit amount based on your employee classification	Social Security Normal Retirement Age	After 90 days

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Increasing your life insurance protection

Purchase additional benefits for yourself, your spouse and child(ren).

	Benefit Amounts	Maximum Benefit Amount	Guaranteed Issue Amount	Option to keep life benefits if you leave the company
Supplemental Life	Increments of $10,000	$500,000	$200,000	✓
Supplemental Spouse Life	Increments of $1,000	$250,000 not to exceed 100% of Employee's Supp Life Amount	$100,000	✓
Supplemental Child Life (birth to age 26)	$10,000	$10,000	$10,000	✓

Guaranteed issue means you don't have to take a health test or answer medical questions.

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Additional programs

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Cancer Care Plan

- Available to All Employees – regardless of age
- High and Low plan options
- If coverage is elected during this open enrollment, coverage is not guaranteed and is based on a medical review
- A wellness benefit is payable once per year per covered individual
- Fully portable/convertible at time of retirement or termination of employment

Allstate®
You're in good hands.

Cancer Plan Benefit Highlights

High Option	
Initial Diagnosis	$5,000
Hospital	$300/day
Surgery up to	$4,500
Radiation/Chemo	$10,000/yr
Private Nurse	$300/day
Experimental	$5,000/yr
Blood/Plasma	$10,000/yr
At home Nursing	$300/day
Wellness Screen	$100/yr

Low Option	
Initial Diagnosis	$2,000
Hospital	$100/day
Surgery up to	$1,500
Radiation/Chemo	$5,000/yr
Private Nurse	$100/day
Experimental	$5,000/yr
Blood/Plasma	$5,000/yr
At Home Nursing	$100/day
Wellness Screen	$50/yr

Allstate®
You're in good hands.

Cancer Plan Costs

High Option

- Monthly Individual $31.51
- Monthly Family $53.92

Low Option

- Monthly Individual $14.13
- Monthly Family $24.20

Allstate®
You're in good hands.

VSP Supplemental Vision Plan

Benefit	Description	Copay	Frequency
WellVision Exam	Focuses on your eye health and overall wellness	$20	Every 12 months
Prescription Glasses		$20	See frames and lenses
Frame	$150 allowance for a wide selection of frames $170 allowance for featured frame brands 20% savings on the amount over your allowance	Included with Prescription Glasses	Every 12 months
Lenses	Single vision, lined bifocal, lined trifocal lenses Polycarbonate lenses for dependent children	Included with Prescription Glasses	Every 12 months
Lens Enhancements	Standard progressive lenses Premium progressive lenses Custom progressive lenses Average 20-25% savings on other lens enhancements	$0 $95 – $105 $150 – $175	Every 12 months
Contacts (instead of glasses)			
Contact Lenses	$200 allowance for contacts; Copay does not apply		Every 12 months
Contact Lens Exam	Contacts lens exam (fitting and evaluation)	up to $60	
VSP EasyOptions	Pick one benefit enhancement:		
	Additional $100 frame allowance, or Fully covered premium or custom progressive lenses, or Fully covered light-reactive lenses, or Fully covered anti-glare coating	$0	Every 12 months

VSP® Vision care for life

VSP Rates

MONTHLY RATE

Coverage Type	Rate
Employee Only	$14.48
Employee + one	$20.99
Family	$37.63

vsp®
Vision care for life

Short-Term Disability Plan

- Carrier: Dearborn National
- Provides a weekly benefit to an employee whose illness or injury causes him/her to be unable to work for over 14 days
- Coverage is for up to 90 days from the date of injury/illness
- Premiums are age- and income-based and are available on the Human Resources website and in the email you received Monday, February 6.

NEW carrier - Accident Insurance (replacement for AFLAC)

Provision	Description
Benefit Coverage per accident	Varies per incident; details on following slide
Health Advocacy Services	Included
EAP+Work/Life Program	Included 3 per person, per calendar year maximum
Wellness Program	Included
Types of Accidental Injuries Covered	
Burns, lacerations, paralysis, fractures, dislocations, emergency dental work, eye injuries.	

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Accident Insurance-Schedule of Benefits Summary

EMERGENCY CARE & DIAGNOSTICS	
Ambulance - Ground	$400 pp/pa
Ambulance - Air	$2,000 pp/pa
Emergency Room	$300 pp/pa
Major Diagnostic Testing	
(MRI, CT Scan, CAT, MRI, EEG)	
1 exam(s) per covered accident	$300 pp/pa
X-Ray	$60 pp/pa
Pain Management/Epidural	
1 visit(s) per covered accident	$100 pp/pa
Initial Doctor's Visit	$100 pp/pa

FOLLOW UP CARE	
Follow Up Doctor's Visit	$100 pp/pa
Physical Therapy	
Up to 10 visits per accident	$75 per visit
Chriopractic Visit	
Up to 10 visits per accident	$75 per visit
Medical Equipment	$400 pp/pa
Prosthetic Device	$2,500 pp/pa

ACCIDENT HOSPITALIZATION & SURGICAL BENEFITS	
Hospital Admission	$1,500 pp/pa
ICU Admission	$3,000 pp/pa
Hospital Confinement	
Up to 365 day(s) per accident	$300 per day
ICU	
Up to 30 day(s) per accident	$600 per day
Rehabilitation/Skilled Nursing Facility	
Up to 90 day(s) per accident	$150 per day
Blood/Plasma/Platelets	$500 pp/pa
Surgery - Open Abdominal, Thoracic	$3,000 per surgery
Surgery - Cranial	$3,000 per surgery
Surgery - Hernia	$1,500 per surgery
Surgery - Exploratory or Without Repair	$400 per surgery
Outpatient/Miscellaneous Surgery	$400 per surgery
Transportation	
Up to 3 trip(s) per accident	$500 per trip
Family Lodging	
Up to 30 nights	$125 per night
Coma	
After 7 day duration	$8,000 pp/pa

Accident Insurance Rates

Coverage Type	Rate
Employee Only	$20.87
Employee + Spouse	$29.64
Employee + Child(ren)	$35.07
Family	$45.45

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NEW Carrier - Hospital Indemnity (replacement for AFLAC)

	Low	High
	Benefit Amounts	
Hospital Stay	$1,000[1]	$2,000[1]
Intensive Care Unit	$1,000[1]	$2,000[1]
Substance Abuse Facility	$200[1]	$200[1]
Mental Health Facility	$200[1]	$200[1]
Nursing Facility	$200[2]	$200[2]
Monthly Premiums		
Employee	$25.46	$48.05
Employee + Spouse	$36.07	$71.64
Employee + Children	$32.32	$59.16
Family	$38.31	$72.01

1 $200 day 2+, 365 days per person per calendar year

2 This benefit is paid only if following a covered hospital stay of at least 3 consecutive days.30 days maximum.

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Hospital Indemnity Policy Health Screening Benefit

Covered Health Screenings	
❑ Biopsy	❑ Fasting blood glucose test
❑ Blood test for triglycerides	❑ Flexible sigmoidoscopy
❑ Bone marrow testing	❑ Hemocult stool specimen
❑ Breast ultrasound	❑ Mammogram
❑ CA 125 (blood test for ovarian cancer)	❑ Pap test
❑ CA 15-3 (blood test for breast cancer)	❑ PSA (prostate-specific antigen tests)
❑ CEA (blood test for colon cancer)	❑ Serum cholesterol test to determine HDL/LDL level
❑ Chest x-ray	❑ Serum protein electrophoresis (blood test for myeloma)
❑ Colonoscopy	❑ Stress test on a bicycle or treadmill
❑ Chest x-ray	❑ Thermography

Benefit pays $50 for a covered health screening, payable once per calendar year.
Available on Critical Illness/Hospital Indemnity coverage

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NEW Offering - Critical Illness

	Employee	Spouse	Child
Benefit Amounts	$10,000, $20,000, or $30,000	100% of the employee benefit	50% of the employee benefit
Guarantee issue	$10,000, $20,000, or $30,000	100% of the employee benefit	50% of the employee benefit

Covered critical illness conditions[2]		% of benefit amount paid
Core Benefits	• Heart Attack 100%, Stroke: 100%; Sudden Cardiac Arrest: 100%; Major Organ Failure: 100%, Coronary Artery Disease Needing Surgery or Angioplasty: 25%	100% 25%
Neurological Conditions	• ALS/Other Motor Neuron Diseases: 100%, Advanced Alzheimer's: 100%, Parkinson's Disease: 100%, Coma: 100%	100%
Childhood Conditions	• Major Congenital Structural Anomaly: 100%, Congenital Chromosomal Abnormality: 00%	100%
Additional Occurrences	• If you are diagnosed with a covered critical illness and you are then, at least one day later, diagnosed with a different covered critical illness, we will also pay the additional critical illness benefit for the second covered condition.	

[2] May vary by state

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Critical Illness Rates

	Employee Attained Age	$10,000	$20,000	$30,000
Employee Only	24 and Under	$2.51	$3.61	$4.71
	25-29	$2.57	$3.72	$4.86
	30-34	$2.99	$4.57	$6.14
	35-39	$3.78	$6.15	$8.51
	40-44	$5.09	$8.77	$12.44
	45-49	$7.91	$14.40	$20.90
	50-54	$11.94	$22.47	$32.99
	55-59	$17.11	$32.81	$48.51
	60-64	$22.77	$44.12	$65.47
	65-69	$28.00	$54.58	$81.17
	70-74	$45.35	$89.29	$133.23
	75-79	$70.13	$138.84	$207.55
	80-84	$87.62	$173.83	$260.03
	85 and Over	$112.52	$223.63	$334.74

	Employee Attained Age	$10,000	$20,000	$30,000
Employee + Child(ren)	24 and Under	$6.19	$10.21	$14.24
	25-29	$6.24	$10.32	$14.40
	30-34	$6.67	$11.17	$15.67
	35-39	$7.46	$12.75	$18.05
	40-44	$8.77	$15.37	$21.97
	45-49	$11.58	$21.01	$30.43
	50-54	$15.62	$29.07	$42.53
	55-59	$20.79	$39.42	$58.04
	60-64	$26.44	$50.72	$75.00
	65-69	$31.67	$61.19	$90.70
	70-74	$49.03	$95.89	$142.76
	75-79	$73.80	$145.44	$217.08
	80-84	$91.30	$180.43	$269.56
	85 and Over	$116.20	$230.24	$344.27

	Employee Attained Age	$10,000	$20,000	$30,000
Employee + Spouse	24 and Under	$5.07	$7.30	$9.54
	25-29	$5.35	$7.86	$10.38
	30-34	$6.11	$9.39	$12.66
	35-39	$7.60	$12.36	$17.12
	40-44	$10.60	$18.36	$26.13
	45-49	$16.43	$30.02	$43.61
	50-54	$25.24	$47.64	$70.04
	55-59	$34.45	$66.06	$97.68
	60-64	$47.02	$91.21	$135.40
	65-69	$61.89	$120.95	$180.01
	70-74	$83.50	$164.17	$244.84
	75-79	$115.36	$227.88	$340.41
	80-84	$175.24	$347.65	$520.06
	85 and Over	$225.05	$447.26	$669.48

	Employee Attained Age	$10,000	$20,000	$30,000
Family	24 and Under	$9.64	$15.52	$21.40
	25-29	$9.92	$16.08	$22.23
	30-34	$10.68	$17.60	$24.52
	35-39	$12.17	$20.57	$28.98
	40-44	$15.17	$26.58	$37.99
	45-49	$21.00	$38.23	$55.47
	50-54	$29.81	$55.86	$81.90
	55-59	$39.02	$74.28	$109.53
	60-64	$51.59	$99.43	$147.26
	65-69	$66.46	$129.17	$191.87
	70-74	$88.07	$172.39	$256.70
	75-79	$119.93	$236.10	$352.27
	80-84	$179.81	$355.86	$531.92
	85 and Over	$229.62	$455.48	$681.34

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Group online employee portal (MyGO)

Self-service claims management for employees

With MyGO, you can:

- Initiate claims
- Submit documents
- Check claim status
- Contact customer service

Symetra Life Insurance Company
First Symetra National Life Insurance Company of New York

A convenient way to access your benefits information

Group Disability Insurance

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My Group Online (MyGO) is a convenient, user-friendly online administration tool that allows you to securely access and manage your benefits information from your computer, tablet or smartphone.

By signing in to your MyGO account, you can initiate claims, view claim details and payment status, and much more.

Your account is available 24 hours a day, 7 days a week.

Visit www.symetra.com/MyGO to:

- Initiate disability claims.
- Self-register to view claim status and payment details.
- Send documents securely to our claims team.
- Contact claims customer service.
- Download forms and other helpful claims process information.

Add MyGO to your favorites for quick mobile access.

Ready to get started?

1. Visit symetra.com/MyGO.
2. Click "New user claim" to submit your first claim.
3. Create an online profile after receiving an email from Symetra.

For more information, contact your benefits representative.

www.symetra.com
www.symetra.com/my

Symetra Life Insurance Company, 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004.
First Symetra National Life Insurance Company of New York, New York, NY. Mailing address: P.O. Box 34690, Seattle, WA 98124.

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EAP and Value Add programs

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Employee assistance program

Professional advice for your work and home life

- Counselors, financial planners and attorneys
- 5 sessions/year (5 more with a covered disability)
- Online work/life resources available
- Assistance with things like:
    - Stress, substance abuse, debt, retirement

Employee assistance program is provided by ComPsych® Corporation. Benefits may not be available in all states. ComPsych Corporation is not affiliated with Symetra Life Insurance Company or any of its affiliates.
In California, counseling sessions are limited to three sessions in a six-month period.

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Travel assistance program

Emergency help when you're far from home

- 24/7 availability
- 200+ countries/territories
  - 100 miles+ from home
  - Trips lasting 90 days or less
- Key services
  - Help finding physicians, dentists and medical facilities
  - Medication and eyeglasses replacement
  - Emergency cash

Travel Assistance is provided by EuropAssistance. Benefits may not be available in all states. EuropAssistance is not affiliated with Symetra Life Insurance Company or any of its affiliates.For more information, visit www.europassistance-usa.com.

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Identity theft protection program

Resources to help prevent identity theft

- Support if ID is stolen
- Key services
  - Assistance completing ID theft affidavit
  - Help replacing cash, debit and membership cards
  - Access to emergency cash
  - Translation services

There is no guarantee that intervention on behalf of covered members will result in a particular outcome or that efforts on their behalf will lead to a result satisfactory to them. Services do not include, and covered members will not be assisted with, thefts involving non-U.S. bank accounts.

Identity Theft Protection is offered by Generali Global Assistance. Benefits may not be available in all states. Generali Global Assistance is not affiliated with Symetra Life Insurance Company or any of its affiliates. For more information, visit us.generaliglobalassistance.com.

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Beneficiary companion

Beneficiary assistance coordinators help manage a loved one's final affairs

- Guidance on obtaining death certificate copies
- Manage notifications to SSA, credit reporting agencies, financial institutions, etc.
- Help if a deceased's identity is stolen

Beneficiary Companion is offered by Generali Global Assistance. Benefits may not be available in all states. Generali Global Assistance is not affiliated with Symetra Life Insurance Company or any of its affiliates. For more information, visit us.generaliglobalassistance.com.

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Group short-term and long-term disability income policies base certificate form number is GDC-4500 12/05. Group Life and Accidental Death and Disability (AD&D) policies base certificate form number is LGC-13500-CERT 08/06.

Coverage may be subject to exclusions, limitations, reductions and termination of benefit provisions. For costs and complete details of the coverage, call your benefits/HR/Symetra representative.

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