
Life Insurance and Accidental Death & Dismemberment Plan

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LIFE INSURANCE

TERMS

Terms that are defined in the Glossary of this SPD are bolded and capitalized when they first appear in the text; thereafter, they will be capitalized wherever they are used in the text. See the Glossary section for more information.

The types of Life Insurance available under the Cafeteria Plan are Life, AD&D, Spouse Life Insurance and Child Life Insurance coverage. Life Insurance is insured under a group policy issued by Securian Financial Group (the Group Policy). Securian Financial Group is the insurance carrier/administrator retained by Allstate to provide Life and AD&D insurance and claims administrative services for the Life AD&D benefit plan (otherwise known as the Third Party Claims Administrator).

The benefits under this Plan do not at any time provide paid-up insurance, loans, or cash values.

Tobacco Use

Employees and covered dependent(s) who enroll in Life Insurance and who during their initial eligibility period and in each subsequent Annual Enrollment Period attest to being tobacco-free will not be subject to the tobacco-user rates.

Specific terms used when determining the applicability of the tobacco-user rates. Those terms are defined as follows:

- Tobacco products include cigarettes, electronic cigarettes (e-cig or E-cigarette), personal vaporizer (PV) or electronic nicotine delivery system (ENDS), cigars, pipes, snuff, chewing tobacco, and/or any other product containing tobacco.
- Home means your primary residence.
- Smoke-free indoor environment at home is one in which no one uses or smokes tobacco products within the home.

In order to be considered tobacco-free and not subject to the tobacco-user rates, the following requirements must be met:

- You and your covered dependents must not use or smoke tobacco products at the time of Annual Benefits Enrollment and must pledge not to use or smoke tobacco products at any time during the Plan Year for which you are enrolling;
- and
- You and your covered dependents must have a smoke-free indoor environment at home at the time of Annual Benefits Enrollment and must pledge to maintain a smoke-free indoor environment at home throughout the Plan Year for which you are enrolling;
- And
- You must actively attest to being tobacco-free on the *Your Benefits Resources*[™] website at Allstate Good Life.

If you do not actively attest to your tobacco status on the *Your Benefits Resources*[™] website during each Annual Benefits Enrollment, you will default to tobacco user status and will be subject to the per paycheck tobacco-user rates. No changes will be allowed once the Plan Year begins.

ENROLLMENT, EFFECTIVE DATES OF COVERAGE, AND EVIDENCE OF INSURABILITY

Enrolling in and Changing Life & AD&D Insurance

You may enroll in or increase your Life and/or AD&D Insurance:

- during your first 31 days of eligibility;
- during Annual Benefits Enrollment; or
- if you experience a Qualified Change in Status.

Evidence of Insurability (EOI) rules apply when enrolling in Life Insurance.

Effective Date of Coverage for Life & AD&D Insurance

- Life insurance will become effective the date you enroll and are Actively at Work, if you have enrolled for coverage within 31 days of becoming eligible, or the date EOI, if required, is approved by Securian Life; or
- AD&D insurance will become effective the date you enroll and are Actively at Work, if you have enrolled for coverage within 31 days of becoming eligible, or the date EOI, if required, is approved by Securian Life; or
- January 1 of the following Plan Year for Amounts of Life and AD&D Insurance for which no EOI is required if you enrolled or increased your Amount of Life Insurance during Annual Benefits Enrollment.

NOTE

If you are not Actively at Work on the date coverage would normally begin, your coverage will be effective on the date you return to Active Work.

Part-time employees are not eligible to enroll in the following coverages until they reach 1,000 hours of service: Life Insurance, Dependent Life, Child Life, or Accidental Death and Dismemberment.

Life Insurance Evidence of Insurability (EOI) Rules

Evidence of Insurability (EOI) is required based on the following for all subsequent Annual Enrollments or upon a Qualified Change in Status. Securian Life has the right to validate the statements made on your application for accuracy within two years from the effective date of your coverage, and may contest your coverage if there are material misrepresentations.

Life Insurance

Newly Eligible	<p>No EOI Required</p> <ul style="list-style-type: none"> ➤ Enrollment in one, two, or three times QAE up to \$500,000 for enrollments within the initial 31-day eligibility period. <p>EOI Required</p> <ul style="list-style-type: none"> ➤ Enrollment in four, five, six, seven, or eight times QAE for enrollments within the initial 31-day eligibility period. ➤ Enrollment in coverage amounts over \$500,000 for enrollments within the initial 31-day eligibility period.
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Life Insurance	
Annual Enrollments	<p>No EOI Required</p> <ul style="list-style-type: none"> ➤ During the 2019 Annual Enrollment Period (November 19, 2018 - December 4, 2018) for benefits effective January 1, 2019: late entrants may enroll in life insurance coverage of one times QAE (up to a maximum of \$500,000); or. ➤ Increase of one times QAE (up to a maximum of five times QAE or \$500,000) for current enrollees during Annual Enrollment <p>EOI Required</p> <ul style="list-style-type: none"> ➤ Late Entrant of more than one times QAE for current employees not enrolled in life insurance coverage in 2018; or ➤ Increases of more than one times QAE for current enrollees during Annual Enrollment; or ➤ Any requested Life Insurance change where the new life insurance coverage amount is greater than \$500,000. This includes employees already covered at levels over \$500,000 (i.e. participant has \$1.2 million in Life Insurance coverage, requesting to be moved to \$1.5 million). ➤ After 2019 Annual Enrollment Period, enrollment in one, two, three, four, five, six, seven, or eight times QAE for Employees who did <i>not</i> enroll during the initial 31-day eligibility period or who dropped their coverage thereafter. ➤ Election of coverage resulting in six, seven, or eight times QAE during Annual Enrollment ➤ Employees enrolling for the first time and employees who were previously declined coverage by Securian Life are not eligible without EOI.
Qualified Changes in Status (as identified by Allstate)	<p>No EOI Required</p> <ul style="list-style-type: none"> ➤ Increase of one times QAE (up to a maximum of five times QAE) for current enrollees if an Employee experiences a Qualified Change in Status. <p>EOI Required</p> <ul style="list-style-type: none"> ➤ Increases of more than one times QAE for current enrollees if an Employee experiences a Qualified Change in Status. ➤ Election of coverage resulting in six, seven, or eight times QAE if an Employee experiences a Qualified Change in Status. ➤ Any requested Life Insurance change where the new life insurance coverage amount is greater than \$500,000. This includes employees already covered at levels over \$500,000 (i.e. participant has \$1.2 million in Life Insurance coverage, requesting to be moved to \$1.5 million). ➤ Employees enrolling in coverage for the first time and employees who were previously declined coverage by Securian Life are not eligible without EOI
Salary Increases	<p>No EOI Required</p> <ul style="list-style-type: none"> ➤ Coverage increases due to salary changes to the plan maximum.

LIFE COVERAGE OPTIONS

If you should die while insured under Life Insurance and the claim is approved, Securian Life will pay your Amount of Life Insurance to your beneficiary(ies). Qualified Annual Earnings (QAE) is used to calculate the Amount of Life Insurance. QAE is rounded to the nearest \$1,000. QAE is capped at \$500,000.

Life Insurance

You may choose from the following options:

- Option 0: No Coverage
- Option 1: 1 × QAE
- Option 2: 2 × QAE
- Option 3: 3 × QAE
- Option 4: 4 × QAE
- Option 5: 5 × QAE
- Option 6: 6 × QAE
- Option 7: 7 × QAE
- Option 8: 8 × QAE

To an overall plan maximum of \$4,000,000

QAE is rounded to the nearest \$1,000. QAE is capped at \$500,000 each year for Life Insurance calculation

Example

If an Employee's QAE is \$600,000 and he or she elects a coverage level of 6 × QAE, the total Amount of Life Insurance is \$3,000,000 (6 × \$500,000, maximum QAE per level).

LIFE INSURANCE WHILE TOTALLY DISABLED

If, while insured under Life Insurance, you exhaust your two-year LOA period; are certified totally disabled; and do not meet the retirement qualifications, or choose not to retire; you may be able to continue your Life Insurance coverage under a Waiver of Premium until age 65. You must contact Securian Life and apply for a Waiver of Premium. This waiver will begin after it is approved by Securian Life and you have been Totally Disabled for the greater of (a) the end of your Short Term Disability benefits or (b) 180 days.

Securian Life must receive written notice at the address provided below of your total disability within one year of the onset of total disability. Securian Life may contact you during your leave of absence regarding Waiver of Premium. If you are not contacted, you will need to call Securian Life at (888) 658-0193. Complete your Waiver of Premium application and send to Securian Life at the following address:

Securian Financial Group Claims
PO Box 64114
St. Paul, MN 55164

For each 12-month period after your Waiver of Premium claim is approved, you must submit proof to Securian that your Total Disability has continued. Securian Life must receive this proof within three months prior to the start of each new 12-month period. If you die, Securian Life must receive proof that the Total Disability continued from the last time you submitted proof of Total Disability until the date of death.

Securian Life has the right to have you examined as often as reasonably necessary, but not more than once a year after your life insurance has been continued for two full years under this provision. Any necessary exams will be at Securian Life's expense.

Waiver of Premium	<ul style="list-style-type: none"> ➤ Waiting period: Greater of (a) the end of the STD benefits or (b) 180 days ➤ Must be disabled prior to age 65 ➤ Terminates on the day the employee reaches age 65 (Upon attaining age 65, Life coverage will end and you will be offered conversion/portability coverage.) ➤ Not available with ported coverage.
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If death occurs while terminated totally disabled, the death benefit payable is as follows:

1. If terminated due to disability from January 1, 1991 through December 31, 2000, and death occurs prior to age 65, the death benefit is equal to the Amount of Life Insurance in force on the date your Waiver of Premiums began. Claim will be paid through Securian Life.
 - Securian Financial Group Claims
P.O. Box 64114
St. Paul, MN 55164

Phone: (888) 658-0193
2. If terminated due to disability before January 1, 1991, and after December 31, 2000 through December 31, 2013, claims will be paid through MetLife:
 - If death occurs before the end of the month for which you reach age 65, the death benefit is equal to the Amount of Life Insurance in force on the date your Waiver of Premium begins; or
 - If death occurs after the end of the month during which you reach age 65, and you were hired prior to January 1, 2003, the death benefit payable will be the greater of:
 - 40% of the Amount of Life Insurance you were insured for in the Life Insurance and AD&D Plan as of August 31, 1987, (you must have been a participant on that date), but not more than \$100,000; or
 - One times your QAE on the date your Waiver of Premium began, but no more than \$10,000.
 - MetLife
P.O. Box 14362
Lexington, KY 40512-4632

Phone: (800) 300-4296
Fax: (315) 792-6600
3. If terminated due to disability after January 1, 2014, and before the end of the month for which you reach age 65, Life claims will be paid through Securian Financial Group.
 - Securian Financial Group Claims
P.O. Box 64114
St. Paul, MN 55164

Phone: (888) 658-0193

If you were hired prior to January 1, 2003, and retire (health or voluntary retirement) or terminate as a TTD Employee while Totally Disabled, the death benefit payable is as described in the SPDs for The Allstate Insurance Company Life Insurance Plan for Former Claims Employees, and The Allstate Corporation Life Insurance Plan for Former Non-Claims Employees.

If you were hired on or after January 1, 2003, and retire (health or voluntary retirement) while Totally Disabled, you will not be eligible for coverage under this provision. Your death benefit will continue until age 65 only if you terminate as a Terminated Totally Disabled (TTD) Employee. Upon reaching age 65, you may convert your death benefit to an individual policy, as outlined below.

NOTE

An Employee who is on an Employer-approved illness leave of absence (LOA) for two years and subsequently terminates his/her employment as a Terminated Totally Disabled (TTD) Employee after January 1, 2007, will be required to have three or more years of continuous coverage in the Life Insurance and AD&D Plan immediately prior to termination to be eligible for coverage under this provision. In addition, a TTD Employee who was hired on or after January 1, 2003, is not eligible for coverage beyond age 65.

Termination of Coverage When Totally Disabled

While you are Totally Disabled, your Life Insurance will not continue beyond the date the first of these events occurs:

- you fail to submit to a required exam;
- you fail to give proof of Total Disability;
- you are no longer Totally Disabled;
- you retire; or
- you reach age 65.

If your life insurance terminates while you are disabled, you have a Conversion Privilege unless you return to Active Work and again are insured for life insurance.

If you die during the 31-day period allowed for conversion, and you had an individual policy obtained through the Conversion Privilege, the benefit under this Life Insurance provision is payable only if the individual policy is surrendered without claim other than for return of premiums paid less any indebtedness.

Life Insurance Termination and Exclusions

Termination	
Term Life	➤ Terminates at retirement, loss of eligibility, or termination of employment
Life Exclusions	
Life	➤ Suicide exclusion applies. This exclusion limits our liability to an amount equal to the premiums paid for an insured if the insured, whether sane or insane, dies by suicide within two years of the effective date of his or her insurance. For existing amounts transferred to our policy, the time insurance was in force under the prior policy(ies) will count toward this two-year limitation.

DEPENDENT LIFE: SPOUSE LIFE INSURANCE AND CHILD LIFE INSURANCE COVERAGE

Eligibility

You may enroll your eligible dependents in Spouse Life Insurance and/or Child Life Insurance coverage.

Spouse Life Insurance or Child Life Insurance cannot exceed 100% of the employee's life amount.

Your first day of employment as an Employee is the date you become eligible. As a covered Employee, you may enroll your eligible dependents if you are enrolled in Life Insurance.

Note: If you and your spouse or domestic partner/civil union partner are both employed by Allstate, Esurance or Answer Financial, you cannot enroll your spouse or domestic partner/civil union partner in spouse life coverage and only one employee can enroll child(ren) in child life coverage. Child life is only available for your eligible child(ren) on file.

Those eligible for Spouse Life or Child Life Insurance are:

- your lawful spouse/domestic partner/civil union partner; and
- your children who are:
 - six months old, but less than 26 years old; or
 - a child with a mental or physical disability, regardless of age, provided such child:
 - enrolled during his or her initial eligibility period, or was covered in the Dependent Life Insurance Plan immediately prior to age 26;
 - is continuously enrolled for coverage under the Dependent Life Insurance Plan after such age (i.e., coverage does not terminate or end, for whatever reason or length of time, after reaching age 26, as applicable); and
 - is incapable of self-sustaining employment, as determined by the Plan Administrator.

The term “children” means:

- your biological children;
- children you have legally adopted or who have been “placed” with you for adoption. “Placement” or “placed” for adoption in connection with any placement for adoption of a child with any Employee means the assumption and retention by such Employee of a legal obligation for total or partial support of such child in anticipation of adoption; and children of your domestic partner/civil union partner. The child’s placement with such Employee terminates upon the termination of such legal obligation; and
- children for whom you are legal guardian or have legal custody, and step-children.

NOTE

Dependents must not be: confined at home under a Physician’s care; receiving or applying to receive disability benefits from any source; or hospitalized in order for Spouse or Child Life coverage to be effective.

Effective Date of Coverage

Note: If you and your spouse or domestic partner/civil union partner are both employed by Allstate, Esurance or Answer Financial, you cannot enroll your spouse or domestic partner/civil union partner in spouse life coverage and only one employee can enroll child(ren) in child life coverage. Child life is only available for your eligible child(ren) on file.

Spouse Life Insurance and Child Life Insurance will begin on the earliest of:

- the later of the date you become eligible for Life Insurance and are Actively at Work, if you have enrolled for coverage within 31 days of becoming eligible, or the date EOI, if required, is approved by Securian Life;
- the date your dependent(s) first becomes eligible for coverage, if you enrolled within 31 days of the date your dependent(s) becomes eligible;
- January 1 of the following Plan Year, if you enrolled during Annual Benefits Enrollment; or
- the date of your Qualified Change in Status, if you enrolled within 31 days of the Qualified Change in Status.

Spouse Life Insurance Coverage

Benefits available in increments of \$10,000 from \$10,000 to \$250,000.

Spouse Life Insurance cannot exceed 100% of the Employee’s Life amount.

Spouse Life Insurance will begin on the date Securian Life approves EOI (if applicable) for your spouse/domestic partner/civil union partner.

Spouse Life Insurance Evidence of Insurability (EOI) Rules

Spouse Life	
Newly Eligible (new hire)	<ul style="list-style-type: none"> ➤ Employees can elect up to \$30,000 of Spouse Life coverage without EOI.
Future Annual Enrollments	<ul style="list-style-type: none"> ➤ For 2019 Annual Enrollment, coverage effective January 1, 2019 only and Family Status Changes in 2019: <ul style="list-style-type: none"> • Employees may increase current Spouse Life coverage by one \$10,000 increment up to \$30,000 without EOI. ➤ EOI will be required for employees: <ul style="list-style-type: none"> • Enrolling in Spouse Life coverage for the first time (late entrant); • Increasing coverage from \$10,000 to \$30,000 (if increasing more than one increment); • Increasing Spouse Life coverage to any amount above \$30,000; and • Elections for any amount of Spouse Life for spouses who have been previously declined by Securian Life. ➤ Spouse Life Insurance will be effective on the later of the EOI approval date or January 1 of the following Plan Year.
Qualified Changes in Status (as identified by Allstate)	<ul style="list-style-type: none"> ➤ Within 31 days of a Qualified Change in Status, employees will be eligible to increase current Spouse Life coverage by one \$10,000 increment up to \$30,000 without EOI. ➤ EOI will be required for employees: <ul style="list-style-type: none"> • Enrolling in Spouse Life coverage for the first time (late entrant); • Increasing coverage from \$10,000 to \$30,000 (increasing more than one increment); • Increasing Spouse Life coverage to any amount above \$30,000; and • Elections for any amount of Spouse Life for spouses who have been previously declined by Securian Life.
Outside of Newly Eligible, Enrollments, and Qualified Change in Status	<ul style="list-style-type: none"> ➤ Elections are not allowed outside of newly eligible, Annual Enrollment and Qualified Change in Status.

Child Life Insurance Coverage

Benefits available in increments of \$5,000 from \$10,000 to \$25,000. Child life coverage is not subject to EOI; however, no elections can be made outside of newly eligible status, Annual Enrollment or a Qualified Change in Status.

Dependents cannot become insured if they are confined at home under a Physician's care, receiving or applying to receive disability benefits from any source, or hospitalized at the time the insurance would normally become effective. In this case, the dependents will become insured on the first day of the month following the date they are no longer confined, receiving or applying for disability benefits, or hospitalized. If the date the dependent meets these requirements is the first day of the month, insurance will begin on that day.

Note: If you and your spouse or domestic partner/civil union partner are both employed by Allstate, Esurance or Answer Financial, you cannot enroll your spouse or domestic partner/civil union partner in spouse life coverage and only one employee can enroll child(ren) in child life coverage. Child life is only available for your eligible child(ren) on file

Payment of Insurance Benefits

All benefits for loss of a spouse and/or child(ren) life insurance will be paid to you. If you should die first, payment will be made to your estate.

Spouse Life Insurance and Child Life Insurance Termination and Exclusions

Termination	
Spouse Life Insurance and Child Life Insurance	➤ Ends upon termination of employment or loss of eligibility
Life Exclusions	
Spouse Life Insurance	➤ Suicide exclusion applies. This exclusion limits our liability to an amount equal to the premiums paid for an insured if the insured, whether sane or insane, dies by suicide within two years of the effective date of his or her insurance. <i>For existing amounts transferred to our policy, the time insurance was in force under the prior policy(ies) will count toward this two-year limitation.</i>

Accelerated Death Benefit

If you have a life expectancy of 24 months or less, you can request an accelerated death benefit from your life insurance plans. Similarly, if your dependent has a life expectancy of 24 months or less, you can request an accelerated death benefit from the dependent life insurance plan.

To qualify for an accelerated benefit, you or your covered dependent must:

- Be insured for at least \$10,000;
- Have not assigned ownership rights under the coverage;
- Not have an irrevocable beneficiary; and
- Be terminally ill (life expectancy of 24 months or less).

If you qualify, you may choose a full or a partial accelerated benefit. A partial benefit can only be requested if the remaining amount after the early payout is at least \$25,000. If a partial benefit is chosen, coverage will remain in force and the amount remaining will be the full amount prior to the early payout minus the amount that was accelerated. If a full benefit is paid, the coverage will end. If your life coverage ends due to taking a full benefit, then any coverage on your dependents will also end at that time, though they will have the right to convert to an individual policy as described in the conversion section.

An accelerated benefit will be made available on a voluntary basis only. An accelerated benefit under this supplement is not intended to cause an involuntary reduction of the death benefit ultimately payable to the named beneficiary. Therefore, payment of the death benefit cannot be accelerated under this supplement if the insured:

1. is required by law to use this option to meet the claims of creditors, whether in bankruptcy or otherwise; or
2. is required by a government agency to use this option in order to apply for, obtain, or keep a government benefit or entitlement.

The maximum amount that can be accelerated is \$1,000,000.

CONTINUATION OF YOUR GROUP TERM LIFE INSURANCE COVERAGE

When your Life Insurance coverage terminates, you may be able to continue your group term life insurance coverage, and pay premiums directly to Securian Life. Premiums may be higher than those paid by active employees. If you wish to continue your coverage, you have 31 days from your last day of employment to complete the application.

If you have questions about your options for continuing your group term life insurance coverage or would like to request continuation forms, please contact Securian Life at 1-866-884-2626. The completed application must be received by Securian Life within 31 days of your benefit termination.

PORTABILITY ELIGIBLE LIFE INSURANCE

Portability Option

If you leave the Company or retire, you may be able to take your Life/AD&D, Spouse Life and Child Life Insurance with you and continue to pay group term life rates directly to Securian Life. Rates may be higher than you paid as an active employee. If you elect to continue your own insurance, you can also continue insurance on your dependents.

You cannot continue your coverage if:

- You have attained the age of 70; or
- You have converted your insurance to an individual policy.

There are maximums on the amount of coverage that can be ported. To learn more about your portability options, please call Securian Life at 1-866-884-2626.

CONVERSION PRIVILEGE FOR LIFE INSURANCE

IMPORTANT

Employees hired on or after January 1, 2003, are not eligible for Retiree Life Insurance Benefits.

Conversion Right

If your Life Insurance under the group policy terminates, you may be able to convert your life insurance to a new individual life insurance policy. You may convert up to the full amount of terminated insurance if termination occurs because you move from one existing eligible class to another, or you are no longer in an eligible class.

Limited conversion is available if, after you have been insured for at least five years, insurance is terminated because:

1. the group policy is terminated; or
2. the group policy is changed to reduce or terminate your insurance.

In such case, you may convert up to the full amount of terminated insurance, but not more than the maximum. The maximum is the lesser of:

- \$10,000; and
- the amount of life insurance which terminated minus any amount of group life insurance for which you become eligible under any group policy issued or reinstated by us or any other carrier within 31 days of the date the insurance terminated under the group policy.

Neither the conversion right nor the limited conversion right is available if your coverage under the group policy terminates due to failure to make, when due, required premium contributions.

Under both the conversion right and the limited conversion right, you may convert your insurance to any type of individual policy of life insurance then customarily issued by Securian Life for purposes of conversion, except term insurance. The individual policy will not include any benefits, including, but not limited to, any disability benefits, accidental death and dismemberment benefits, or accelerated benefits.

Converting Your Insurance

You can convert your insurance by applying for an individual policy and paying the first premium within 31 days after your group insurance terminates. No evidence of insurability will be required.

Securian Life determines the premium for the individual policy based on the plan of insurance, your age, and the class of risk to which you belong on the date of the conversion.

The individual policy takes effect 31 days after the group insurance provided under the group policy terminates. If you die during the 31-day period allowed for conversion, Securian Life will pay a death benefit regardless of whether or not an application for coverage under an individual policy has been submitted. The death benefit will be the amount of insurance you would have been eligible to convert under the terms of the conversion right section.

Securian Life will return any premium you paid for an individual policy to your beneficiary named under the group policy. In no event will Securian Life be liable under both the group policy and the individual policy.

CONVERSION PRIVILEGE FOR DEPENDENT LIFE: SPOUSE LIFE AND CHILD LIFE INSURANCE

If an insured dependent's coverage terminates because he or she is no longer eligible, or because of your death, or because of termination or amendment, the insurance may be converted to a policy of individual insurance with Securian Life.

Conversion may be requested by you, an insured dependent of legal capacity, or the insured dependent's guardian, if applicable. All other conditions and provisions of the conversion right section of your certificate will apply.

ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE COVERAGE

Eligibility

You are eligible for Accidental Death and Dismemberment (AD&D) Insurance if you are an active Employee who is Actively at Work. If you go on a leave of absence after enrolling, you remain covered.

Effective Date of Coverage

You become insured on the date you are eligible. If you are absent from work on the day insurance would normally begin, you will become insured on the day you return to Active Work.

Available Benefits

You may elect the following AD&D insurance benefits:

- For you: One to eight times QAE up to a maximum of \$1,000,000. The QAE is subject to a cap of \$125,000.

The injury must occur while the insured's coverage is in force. The insured's death or dismemberment must occur within 180 days after the date of injury.

The following Schedule of Benefits is provided below.

Once Securian Life approves your Proof of Loss, this benefit is payable for any loss shown below due to an Injury while insured, provided the loss meets the following requirements:

- Accidental death or dismemberment by accidental Injury means that the insured's death or dismemberment results, directly and independently of all other causes, from an accidental bodily Injury which is unintended, unexpected, and unforeseen. The bodily Injury must be evidenced by a visible contusion or wound, except in the case of accidental drowning. The bodily Injury must be the sole cause of death or dismemberment.
- The Injury must occur while the insured's coverage is in force. The insured's death or dismemberment must occur within 180 days after the date of the injury.

AD&D Schedule of Benefits

Loss	Benefit
Life	100%
Both hands or both feet or sight of both eyes ¹	100%
Brain Damage ²	100%
Coma ³	1% of the Principal Sum monthly beginning on the 7 th day of the coma, for the duration of the coma to a maximum of 60 months
One hand and one foot ¹	100%
One hand and sight of one eye ¹	100%
One foot and sight of one eye ¹	100%
Thumb and index finger of the same hand ⁴	25%
Speech and hearing in both ears	100%
Quadriplegia	150%
Paraplegia	75%
Hemiplegia	50%
Loss of sight in one eye	50%
One hand or one foot	50%
Speech or hearing in both ears	50%
Loss of all four fingers of the same hand	25%
Uniplegia	25%
Loss of all the toes of the same foot	25%

1. Loss of hands and feet means severance at or above the wrists or ankle joint. Loss of sight means total and irrecoverable loss of sight.
2. Brain damage means permanent and irreversible physical damage to the brain causing the complete inability to perform all the substantial and material functions and activities normal to everyday life. Brain damage must manifest itself within 30 days of the accidental Injury, require hospitalization of at least 5 days and persist for 12 consecutive months after the date of the accidental Injury.
3. Coma means a state of deep and total unconsciousness with no evidence of appropriate responses to stimulation. The insured must be confined in a medical facility and diagnosed as comatose by a licensed physician. Such state must begin within 30 days of the accidental Injury and continue for a minimum of seven consecutive days.
4. Loss of thumb and index finger of same hand means that the thumb and index finger are permanently severed at or above the metacarpophalangeal joints (the joints closest to the palm of the hand).

A benefit is not payable for both loss of thumb and index finger of one hand and the loss of one hand for injury to the same hand as a result of any one accident. A benefit is not payable for both loss of one foot and the loss of all the toes of the same foot as a result of any one accident. Under no circumstance will more than one payment be made for the same loss or paralysis of the same limb.

Benefits may be paid for more than one accidental injury, but the total amount of insurance payable for all of your losses due to any one accident, not including any amount paid according to the terms of the Additional Benefits section of this certificate, will never exceed such insured's full amount of insurance shown in your certificate of insurance.

NOTE

You cannot receive more than your Principal Sum Benefit for all losses due to the same accident.

How Insurance Benefits Are Paid

Securian Life will pay the death benefit upon receipt at our home office of written proof satisfactory to Securian Life that you died while insured under this certificate. All payments by us are payable from our home office. The death benefit will be paid in a single sum or by any other method agreeable to us and the beneficiary.

AD&D Termination and Exclusions

Termination	
AD&D	➤ Terminates at retirement, loss of eligibility, or termination of employment
Conversion	➤ AD&D product cannot be converted
Portability	➤ AD&D product may be ported. See Portability section.

AD&D Exclusions

In no event will we pay the accidental death or dismemberment benefit where the insured's death or dismemberment is caused directly by, or results from, any of the following:

1. self-inflicted injury or self-destruction, whether sane or insane; or
2. suicide or attempted suicide, whether sane or insane; or
3. your commission of, or attempt to commit, a felony, or to which a contributing cause was your being involved in an illegal occupation; or
4. bodily or mental infirmity, illness or disease; or
5. your being intoxicated, as defined and determined by the laws of the state where the injury or loss was incurred; or
6. the use of prescription drugs, non-prescription drugs, or medications, unless prescribed by a physician in the verifiably prescribed manner and dosage; or
7. the voluntary use of illegal drugs; or
8. poisons, gases, fumes or other substances taken, absorbed, inhaled, ingested or injected. This does not include involuntary inhalation of gases and fumes, or the involuntary taking of poison; or
9. motor vehicle collision or accident where you are the operator of the motor vehicle and your blood alcohol level meets or exceeds the level at which intoxication is defined in the state where the collision or accident occurred, regardless of any legal proceedings thereto; or
10. bacterial infection, other than infection occurring simultaneously with, and as a direct and independent result of, the accidental injury, or infection which results from accidental, involuntary or unintentional ingestion of a contaminated substance; or
11. medical or surgical treatment or diagnostic procedures or any resulting complications, including complications from medical misadventure; or
12. travel in or descent from any aircraft, except as a fare-paying passenger on a regularly scheduled commercial flight on a licensed passenger aircraft carrier; or
13. war or any act of war, whether declared or undeclared.

Additional Benefits

Additional Benefits	
Airbag Benefit	<p>Airbag Benefit</p> <p>If an insured dies as a result of a covered accident which occurs while he or she is driving or riding in a private passenger car, we will pay an additional accidental death and dismemberment benefit of \$25,000 or 5% of the insured's amount of insurance, provided:</p> <ol style="list-style-type: none"> 1. the seat in which the insured was seated was equipped with a properly installed airbag at the time of the accident; and 2. the private passenger car is equipped with seatbelts; and 3. a seatbelt was in proper use by the insured at the time of the accident as certified in the official accident report or by the investigating officer; and 4. at the time of the accident, the driver of the private passenger car was a licensed driver and was not impaired, under the influence of alcohol or drugs, or intoxicated as defined by the laws of the jurisdiction where the accident occurred. <p>Airbag means a passive restraint device in a vehicle which inflates upon collision to protect an individual from injury or death.</p> <p>Seatbelt means a properly installed seatbelt (or child restraint if the insured is a child), lap and shoulder restraint, or other restraint approved by the National Highway Traffic Safety Administration or any successor governmental agency. A private passenger car means a validly registered four-wheeled private passenger car or policyholder-owned car, jeep, pickup truck or van, including a sport utility vehicle (SUV), that is not licensed commercially or being used for racing, or acrobatic or stunt driving.</p>
Brain Damage Benefit	<ul style="list-style-type: none"> ➤ If an insured sustains and is diagnosed by a licensed physician as having Traumatic Brain Injury (TBI) as a result of and within 60 days of a covered accidental injury, and such TBI damage has lasted for a minimum of 12 consecutive months, we will pay a monthly benefit equal to the lesser of: <ul style="list-style-type: none"> • 1% of the insured's amount of AD&D insurance; or • 1% of the difference between the insured's amount of AD&D insurance and the amount of any benefits paid under the loss schedule for the same accident (if the full amount of AD&D insurance has been paid, no benefit is payable under this section). ➤ The insured must be hospitalized due to TBI for at least seven days within the first 60 days following the accident. This benefit will be paid monthly until the earlier of the following: <ul style="list-style-type: none"> • the date of the insured's death. If an accidental death payment is due under this rider, the amount of such payment will be reduced by the amount of AD&D insurance paid under this brain damage benefit, or • 100 monthly benefits have been paid. ➤ In no event will the total amount of monthly benefits payable under this section exceed \$50,000.

Additional Benefits

Child Education Benefit	<ul style="list-style-type: none"> ➤ We will pay an education benefit on behalf of your dependent children if you die as a result of a covered accident and are survived by one or more insured dependent children, provided that: <ul style="list-style-type: none"> • at the time of your death, the dependent child is enrolled as a full-time at an accredited post-secondary educational institution (however, no benefit will be payable for the current school year); or • the dependent child enrolls on a full-time basis in an accredited post-secondary educational institution within one year of your death. ➤ The benefit payable will be the lesser of: <ul style="list-style-type: none"> • the actual tuition charged, exclusive of room and board; or • 5% of your amount of insurance; or • \$5,000, per child, per year. ➤ The benefit will be payable at the beginning of each school year for a maximum of four consecutive years, but not beyond the date the child attains age 25. The benefit will be paid to the insured dependent child if he or she is of legal age. If the insured dependent child is not of legal age the benefit will be paid to the person who provides proof they have paid or will pay the tuition bill for that school year. Proof of enrollment and tuition costs are required for each school year.
COBRA Premium Benefit	<ul style="list-style-type: none"> ➤ If an insured employee dies as a result of a covered accident and he or she is survived by his or her insured dependent spouse and/or one or more insured dependent children, we will pay an additional benefit to allow the surviving insured dependent spouse and/or children to continue their group medical coverage. The benefit will be paid to the surviving spouse, if living, otherwise to or on behalf of the dependent children. The benefit will be paid annually and will be equal to the lesser of: <ul style="list-style-type: none"> • 2% of the insured employee's amount of AD&D insurance; or • \$2,500. ➤ However, before we make the first payment and before we make each of the next two payments, we must receive proof that the payment will be used for continuation of the insured's medical coverage pursuant to COBRA. Payment will be made immediately upon our receipt of such proof. If proof is not provided for a particular payment, we will make neither that annual payment nor the subsequent annual payment(s). ➤ Benefits will continue until the earlier of: <ul style="list-style-type: none"> • the end of the three year period commencing with the date of the insured employee's death; or • the date the dependents cease being covered as COBRA participants under the employer's group medical plan.

Additional Benefits

Coma Benefit	<p>Coma Benefit</p> <p>If an insured lapses into a coma as a result of and within 30 days of a covered accidental injury, and such coma has lasted for a minimum of 7 days, we will pay a benefit the lesser of:</p> <ol style="list-style-type: none"> 1. 1% of the insured's amount of insurance; or 2. 1% of the difference between the insured's amount of insurance and the amount of any benefits paid under the loss schedule for the same accident. <p>This benefit will be paid monthly until the earliest of the following:</p> <ol style="list-style-type: none"> 1. the date the insured recovers such that he or she is no longer in a coma as defined herein; or 2. the date of the insured's death. If an accidental death payment is due under this certificate, the amount of such payment will be reduced by the amount of insurance paid under this coma provision; or 3. 60 months following the date monthly benefits commenced. <p>Coma means a state of profound unconsciousness with no evidence of appropriate responses to stimulation. The insured must be confined in a medical facility and diagnosed as comatose by a licensed physician.</p>
Day Care Benefit	<ul style="list-style-type: none"> ➤ If you die as a result of a covered accident and you are survived by one or more dependent children, we will pay additional benefits to reimburse for child care expenses for your dependent children. ➤ The benefit for each child per year will be the lesser of: <ul style="list-style-type: none"> • 3% of your amount of AD&D insurance; or • \$2,000; or • incurred child care expenses. ➤ Child care expenses are those expenses which are for a service or supply furnished by a licensed child care provider or facility for a dependent child's care. No payment will be made for expenses incurred more than four years after the date of your death or for expenses incurred for dependent children over age 14. Proof of incurred child care expenses by your surviving spouse shall be required before any benefit payment is made. The child care benefit will be paid to your surviving spouse. The maximum child care benefit payable under this benefit shall be \$50,000 regardless of the number of children who qualify.
Exposure & Disappearance	<p>Disappearance Benefit</p> <p>If an insured's body has not been found after one year from the date the conveyance in which he or she was traveling disappeared, exploded, sank, became stranded, made a forced landing or was wrecked, it shall be presumed, subject to all other terms of the policy, that the insured has died as a result of an accidental injury which was unintended, unexpected and unforeseen. Such death shall be a covered loss under this certificate.</p> <p>Exposure Benefit</p> <p>If an insured is unavoidably exposed to the elements by reason of a covered accident and suffers a loss that is included in the list of covered losses as a result of such exposure, such loss will be covered under the terms of this certificate.</p>

Additional Benefits	
Felonious Assault	<ul style="list-style-type: none"> ➤ If an insured employee dies or suffers a covered dismemberment as a result of a covered accident caused by a felonious assault, we will pay an additional benefit equal to the lesser of \$50,000 or 25% of the insured employee's amount of AD&D insurance. ➤ A felonious assault is a physical assault by another person resulting in bodily harm to the insured employee. The assault must take place while the insured employee is performing his or her customary duties at the employer's normal place of business or at other places the employer's business requires the insured employee to travel. The assault must involve the use of force or violence with intent to cause harm and must be either a felony or a misdemeanor. ➤ No benefit is payable if the assault is a result of a moving violation or is committed by an immediate family member or a coworker. Immediate family members are the insured employee's spouse/domestic partner/civil union partner, children, parents, grandparents, grandchildren, brothers and sisters, and the spouses of such individuals.
Hospital/Extended Care Facility Benefit	<ul style="list-style-type: none"> ➤ If an insured requires hospitalization or extended care as a result of a covered accident, an additional benefit will be paid to the certificate holder during such hospitalization/extended care facility stay. After a seven-day waiting period, a monthly benefit will be paid for up to 12 months equal to a maximum monthly benefit or the lesser of: <ul style="list-style-type: none"> • 1% of the insured's amount of AD&D insurance, or • \$2,500; or • actual charges made by the hospital/extended care facility due to injuries incurred from the accident. ➤ Payments for periods less than a full month will be made on a pro-rata (daily accrual) basis. If the period of hospitalization/extended care facility stay exceeds seven days, the benefit will be paid retroactively to the first day of hospitalization/extended care stay. No benefit is payable for hospitalizations/extended care stays of seven days or fewer.
Rehabilitation / Physical Therapy Benefit	<ul style="list-style-type: none"> ➤ If an insured suffers an injury which results in a covered dismemberment, we will pay an additional benefit for rehabilitative physical therapy which is prescribed by the attending physician or surgeon. The benefit will be equal to the lesser of: <ul style="list-style-type: none"> • 10% of the insured's amount of AD&D insurance; or • \$10,000; or • Actual costs incurred for such rehabilitative physical therapy.
Repatriation of Remains	<ul style="list-style-type: none"> ➤ If, as a result of a covered accident, an insured dies at least 75 miles from his or her principal residence, an additional accidental death benefit shall be paid for the preparation and transportation of the body to a mortuary. The additional benefit shall be the lesser of the actual cost of such preparation and transportation or \$5,000. The benefit will be paid to the person who has or who will incur such cost, as evidenced to the satisfaction of us. This may or may not be the beneficiary for the rest of the accidental death proceeds. We may at our sole discretion pay benefits directly to the facility handling the preparation and/or transportation. All determinations and payments by us will be final and fully release and discharge us from any further liability under this repatriation benefit.

Additional Benefits

Seat Belt Benefit	<p>Seat Belt Benefit</p> <p>If an insured dies or suffers a covered dismemberment as a result of a covered accident which occurs while he or she is driving or riding in a private passenger car, we will pay an additional accidental death and dismemberment benefit of \$25,000.</p> <p>In order to be eligible for this benefit, the following must apply:</p> <ol style="list-style-type: none"> 1. the private passenger car was equipped with seatbelts; and 2. a seatbelt was in proper use by the insured at the time of the accident as certified in the official accident report or by the investigating officer; and 3. at the time of the accident, the driver of the private passenger car was a licensed driver and was not impaired, under the influence of alcohol or drugs, or intoxicated as defined by the laws of the jurisdiction where the accident occurred. <p>Seatbelt means a properly installed seatbelt (or child restraint if the insured is a child), lap and shoulder restraint, or other restraint approved by the National Highway Traffic Safety Administration or any successor governmental agency. A private passenger car means a validly registered four-wheeled private passenger car or policyholder-owned car, jeep, pickup truck or van, including a sport utility vehicle (SUV), that is not licensed commercially or being used for racing, or acrobatic or stunt driving.</p>
Spouse Education Benefit	<ul style="list-style-type: none"> ➤ If you die as a result of a covered accident and are survived by your insured dependent spouse, we will pay a training benefit to your surviving spouse provided that your spouse: <ul style="list-style-type: none"> • is not working in any capacity (full or part-time) for wage or profit on the date of such accident; and within 365 days after the date of such accident, enrolls as a full-time student in an accredited educational institution or an institution of vocational training for the purpose of preparing for full-time employment. ➤ The benefit will be equal to the lesser of: <ul style="list-style-type: none"> • \$5,000; or the costs incurred for all such education or training within the first year following the date of your death. • Proof of such costs will be required before benefits are paid.

CHOOSING YOUR BENEFICIARIES—FOR LIFE AND AD&D INSURANCE

You may designate one or more beneficiaries to whom benefits will be paid in the event of your death. The beneficiaries you designate will be applicable for Life and AD&D.

You may choose one or more primary beneficiaries. You may also choose one or more contingent beneficiaries. Your living primary beneficiary(ies) is eligible to receive benefits under the Plan upon your death. Your living contingent beneficiary(ies) is eligible only if no primary beneficiary is living at your death. Your beneficiaries may be people or entities including trusts, foundations, or charitable organizations (as long as the organization has a Federal Tax Identification Number). If there are no surviving beneficiaries at the time of your death, or if you choose not to designate beneficiaries, then death benefits will be paid in accordance with the “Order of Payment” provision outlined in this document.

Death benefits will be distributed among your beneficiaries as you have directed on the *Your Benefits Resources*[™] website.

To designate or change your beneficiaries, log on to the *Your Benefits Resources*[™] website at Allstate Good Life. You may also call the Allstate Benefits Center at (888) 255-7772 to speak to a representative if you don't have Internet access. You will need to provide the following information for each beneficiary:

- Name
- Social Security Number
- Birth date
- Gender
- Relationship to you
- Complete address
- Portion of the death benefits to be paid to each beneficiary

NOTE

You may not designate beneficiaries if you have assigned your rights to your insurance.

Once you log on to *Your Benefits Resources*[™], you will enter your beneficiary designation information and submit your request. You may print the “Completed Successfully” page as confirmation of your designation. You may also log onto *Your Benefits Resources*[™] and print this information at any time.

If you don't have access to the Internet, you may call the Allstate Benefits Center and provide your beneficiary information to a representative, who will enter it on the *Your Benefits Resources*[™] website for you. You will be sent a Beneficiary Confirmation Notice showing what was entered.

The Allstate Cafeteria Plan and Securian Life will not incur any additional liability because of a change that is recorded after payments have been made.

Your new beneficiary designation is to be effective when you have successfully submitted it on *Your Benefits Resources*[™] or provided it to the Allstate Benefits Center representative while you are alive, and will cancel all previous beneficiary designations you have made.

If you apply for an individual policy as described in the “Conversion Privilege for Life Insurance” section and die within the 31-day conversion period, the beneficiary you have named for the individual policy of conversion insurance will be the beneficiary for any death benefits, even if you had named a different beneficiary under the Life Insurance.

Your Benefits Resources[™] is a trademark of Hewitt Associates LLC.

STATEMENTS MADE BY YOU OR YOUR SPOUSE/DOMESTIC PARTNER/CIVIL UNION PARTNER WHICH RELATE TO INSURABILITY

Misstatement of Age

If an insured's age has been misstated, the benefit payable will be that amount to which the insured is entitled based on his or her correct age.

A premium adjustment will be made to the premium you pay for the insured's noncontributory insurance and to the premium an insured pays for contributory insurance, if any, so that the actual premium required at the insured's correct age is paid.

Incontestability

Except for fraud or the non-payment of premiums, after the insured's insurance has been in force during his or her lifetime for two years from the effective date of his or her coverage, we cannot contest the insured's coverage. However, if there has been an increase in the amount of insurance for which the insured was required to apply, then, to the extent of the increase, any loss which occurs within two years of the effective date of the increase will be contestable.

Any statements the insured makes in his or her application will, in the absence of fraud, be considered representations and not warranties. Also, any statement an insured makes will not be used to void his or her insurance, or defend against a claim, unless the statement is contained in the application attached to the insured's certificate.

Assignment

Your insurance can be assigned. However, we will not be bound by an assignment of the certificate or of any interest in it unless it is made as a written instrument, you file the original instrument or a certified copy with Securian Life at our home office, and we send you an acknowledged copy.

We are not responsible for the validity of any assignment. You are responsible for ensuring that the assignment is legal in your state and that it accomplishes your intended goals. If a claim is based on an assignment, we may require proof of interest of the claimant. A valid assignment will take precedence over any claim of a beneficiary.

Order of Payment

The death benefit will be paid to the beneficiary or beneficiaries. A beneficiary is named by you to receive the death benefit to be paid at your death. You may name one or more beneficiaries. You cannot name the policyholder or an associated company of the policyholder as a beneficiary.

You may also choose to name a beneficiary that you cannot change without the beneficiary's consent. This is called an irrevocable beneficiary.

If there is more than one beneficiary, each will receive an equal share, unless you have requested another method in writing. To receive the death benefit, a beneficiary must be living on the date of your death. In the event a beneficiary is not living on the date of your death, that beneficiary's portion of the death benefit shall be equally distributed to the remaining surviving beneficiaries. In the event of the simultaneous deaths of you and a beneficiary, the death benefit will be paid as if you survived the beneficiary.

If there is no eligible beneficiary, or if you do not name one, we will pay the death benefit to:

1. your lawful spouse/domestic partner/civil union partner, if living, otherwise;
2. your natural or legally adopted child (children) in equal shares, if living, otherwise;
3. your parents in equal shares, if living, otherwise;
4. your naturally or legally adopted siblings in equal shares, if living, otherwise;
5. the personal representative of your estate.

Adding or Changing Beneficiaries

You can add or change beneficiaries if all of the following are true:

1. your coverage is in force; and
2. we have written consent of all irrevocable beneficiaries; and
3. you have not assigned the ownership of your insurance.

To change your beneficiaries, log on to the *Your Benefits Resources*TM website at Allstate Good Life. You may also call the Allstate Benefits Center at (888) 255-7772 to speak to a representative if you don't have Internet access. All beneficiary changes will take effect on the date the beneficiary change was successfully submitted to the Allstate Benefits Center.

CLAIM PROCEDURES

Under Department of Labor (DOL) regulations, claimants are entitled to full and fair review of any claims made under the Plan. The procedures described in this section are intended to comply with DOL regulations by providing reasonable procedures governing the filing of benefit claims, notification of benefit decisions and appeal of adverse benefit decisions.

Claims for Benefits

To initiate a claim, contact Securian Life. Upon the receipt of notification of a claim, the Insurer will provide claim forms. Read the instructions on those forms carefully, and be sure all the questions are answered and that you include any required attachments. Completed forms must be sent to Claims, PO Box 64114, St. Paul, MN 55164-0114. After your claim has been processed by the Insurer, you will be notified in writing if any benefits are denied in whole or in part, or if any additional information is required.

Claim Denial Procedures

If all or part of your claim for benefits is denied, the Insurer will notify you in writing within 90 days (45 days for any disability claims) of receiving your claim. If special circumstances require more time, the review period may be extended up to an additional 90 days (30 days for disability claims). You will be notified in writing of this extension within the original review period. The notice of extension will explain the circumstances requiring the extension and indicate the date by which the plan expects to render the benefit determination. For disability claims, the review period may be extended up to an additional 30 days provided the written notice described above is sent to the claimant before the expiration of the first 30-day extension period.

For disability claims, the notice of extension will also include a description of the standards on which entitlement to a benefit is based, the unresolved issues that prevent a decision on the claim, the information needed to resolve those issues, and the claimant will be given at least 45 days to provide the information. Where the timeframe to process a disability claim is extended because the claim was incomplete, the time for the claim determination is put on hold from the date the extension notice is sent to the claimant until the date the person responds to the request for additional information. If the person does not provide needed information to the Insurer within 45 days of the date on the notice, the Insurer may deny the claim.

Notification of Claim Denial

Any denial of a claim for benefits will be provided by the Insurer and will include the content required by law.

Appealing the Denial of a Claim

You may appeal any denial of a claim for benefits by filing a written request for a full and fair review to the Insurer at Claims, PO Box 64114, St. Paul, MN, 55164-0114. In connection with such a request, documents relevant to the appeal may be reviewed, and comments and issues outlining the basis of the appeal may be submitted in writing. You may have representation throughout the review procedure, if you submit written proof of the representation to the Insurer. An appeal must be filed by 60 days (180 days for disability claims) after receipt of the written notice of denial of a claim. Before the Insurer can deny a claim on appeal, the Insurer shall provide the claimant with any new evidence considered, relied upon, or generated during the appeal, as well as any new rationale for the decision. Any new evidence or rationale will be provided to the claimant free of charge, as soon as possible before the date by which the appeal is to be decided, so that the claimant may respond to the evidence or rationale before that date. The full and fair review will be held and notification of a decision rendered by the Insurer will be provided no later than 60 days (45 days for disability claims) after receipt of the request for review.

If special circumstances beyond the control of the Insurer require more time, the review period may be extended up to an additional 60 days (45 days for disability claims). You will be notified in writing of this extension within the original appeal period. The notice of extension will explain the circumstances requiring the extension and indicate the date by which the Insurer expects to render the benefit determination.

The notice of extension will include a description of any missing information and shall specify a timeframe, no less than 180 days in which the necessary information must be provided. Where the timeframe to process an appeal is extended because additional information to render an appeal decision is needed, the time for the benefit determination is put on hold from the date the extension notice is sent to the claimant until the date the person responds to the request for additional information. If the person does not provide needed information to the Insurer within the 180 days of the date on the notice, the Insurer may close the appeal and no further consideration will take place.

During all steps of the claims appeal procedure, you can write or call the Insurer and ask to see all documents relevant to your claim. In addition, you may have an attorney or other representative write letters or otherwise act on your behalf, but you may need to provide written proof of designation of the representative.

Notification of Appeal Decision

Written notification of the Insurer's decision on an appeal shall be provided to the claimant and will include the information required by law.

Legal Action Following Appeals

After completing the claims and appeal procedures, you have the right to dispute the determination by bringing a civil action under the Employee Retirement Income Security Act (ERISA). Please refer to the Statement of ERISA Rights section for more details. No such action may be filed after two years from the date the Plan gives you a final determination on your appeal. Also, no legal action may be brought if you do not exhaust these claims procedures, unless exhaustion is not required.

Lifestyle Benefits

Employees have automatic access to resources as needed (under group life coverage) through Securian Financial to additional Lifestyle benefits. This includes the opportunity to create a will, resources for certain legal, financial, legacy planning and travel assistance services. All programs are available to spouses and eligible dependent children even if they are not covered under the group life insurance program. There is no additional premium or enrollment required.

Beneficiary Financial Counseling

Beneficiaries who receive at least \$25,000 in group life insurance proceeds will be invited to access professional guidance to help them make sound financial decisions regarding their policy proceeds. Resources include assessment, workbooks, newsletter, website and more. Access to these services will be provided with the claims payment. Services are provided from PricewaterhouseCoopers LLP (PwC) at no additional cost.

Legal, Financial and Grief Resources

Whether creating a will, needing advice on a legal matter, getting a handle on financial security or struggling to cope with the loss of a loved one—get professional support from LifeWorks. Resources include templates to create a will and other key legacy documents, complimentary 30-minute fact-to-face consultation with an attorney, unlimited telephone consultation with attorneys and counselors, and more. Visit www.LifeBenefits.com/LFG (user name: lfg, password: resources).

Legacy Planning Resources

Provide self-help tools for getting a person's affairs in order in advance as well as for dealing with the loss of a loved one. In addition to the online tools and resources available, funeral concierge service allows for coverage verification and direct payment to the funeral home so that services can be provided before the insurance settlement becomes available. Visit www.Securian.com/legacy.

Travel Assistance Services

While traveling 100 or more miles from home, you have access to pre-trip planning and emergency services. These include medical relocation and medical or security evacuation, assistance replacing lost or stolen luggage or other critical items, repatriation of mortal remains and more. Visit www.LifeBenefits.com/travel or call 1-855-516-5433 in the U.S. and Canada (outside of the U.S. and Canada 1-415-484-4677). Services are provided through Redpoint WTP LLC.

Services provided by LifeWork US Inc., Redpoint WTP, LLC, and PriceWaterhouseCoopers LLP are their sole responsibility. The services are not affiliated with Securian Financial Group or their group contracts and may be discontinued at any time. Certain terms, conditions and restrictions may apply when utilizing the services.