



Customer Service (888) 600-1600 Monday to Friday | 8am to 8:30pm ET

Welcome to Workplace benefits

Everyone deserves a Guardian

Every day, Guardian gives 26 million Americans the security they deserve through our insurance and wealth management products and services.

We've partnered with your organization to offer you a range of employee benefits. Inside this pack, you'll find the plans your employer thinks you might benefit from.

Your coverage options

Know your benefits

Your benefits support your physical and financial wellbeing, to help keep you and your loved ones protected.

With Guardian, you're in good hands. We've been delivering on our promises for over 150 years, and we're looking forward to doing the same for you too.



Find out more about your benefits.

Talk to your employer if you need help or have any questions.

© Copyright 2020 The Guardian Life Insurance Company of America

This document is a summary of the major features of the insurance coverage that's been agreed to with your employer – it isn't your contract.

THIS PAGE INTENTIONALLY LEFT BLANK



Watch our video How long term disability insurance can supplement your income.

Long term disability insurance

Disability insurance covers a part of your income, so you can pay your bills if you're injured or sick and can't work.

Disability may be more common than you might realize, and people can be unable to work for all sorts of different reasons. There are times when many disabilities can be caused by Illness, including common conditions like heart disease and arthritis. However, many disabilities aren't covered by workers' compensation.

Who is it for?

2021-117395 (03/23)

If you rely on your income to pay for everyday expenses, then you should probably consider disability insurance. It helps ensure that you'll receive a partial income if you're injured or too sick to work.

What does it cover?

Many disability insurance plans pay out a portion or percentage of your income if you're diagnosed with a serious illness or experience an injury that prevents you from doing your job.

Why should I consider it?

Accidents happen, and you can't always anticipate if or when you'll become sick or injured. That's why it's important to have a disability policy that helps you pay your bills in the event of being unable to collect your normal paycheck.



Partial income replacement

Jim suffers a heart attack that leaves him unable to work for two years.

Unpaid time off work: 24 months

Elimination period: 6 months

After a 6 month elimination period, Jim's Guardian Long Term Disability policy kicks in and replaces **\$2,000** of his monthly income for the remaining **18 months** of his disability or illness.

This gives him a total of **\$36,000** to cover his expenses while he's unable to work.

This example is for illustrative purposes only. Your plan's coverage may vary. See your plan's information on the following pages for specific amounts and details.

You will receive these benefits if you meet the conditions listed in the policy.

GUARDIAN® is a registered trademark of The Guardian Life Insurance Company of America VENSURE HR INC. LONG TERM DISABILITY-OPTION 6 (SIC 1+ AGE BAND)

Kit created 12/09/2022 Group number: 00045877



Your long term disability coverage

| | Long-Term Disability | | | | | |
|---|---|--|--|--|--|--|
| Coverage amount | 60% of salary to maximum \$10000/month | | | | | |
| Maximum payment period: Maximum length of time you can receive disability benefits. | Social Security Normal Retirement Age | | | | | |
| Accident benefits begin: The length of time you must be disabled before benefits begin. | Day 181 | | | | | |
| Illness benefits begin: The length of time you must be disabled before benefits begin. | Day 181 | | | | | |
| Evidence of Insurability: A health statement requiring you to answer a few medical history questions. | Health Statement may be required | | | | | |
| Guarantee Issue: The 'guarantee' means you are not required to answer health questions to qualify for coverage up to and including the specified amount, when applicant signs up for coverage during the initial enrollment period. | We Guarantee Issue \$10000 in coverage | | | | | |
| Minimum work hours/week: Minimum number of hours you must regularly work each week to be eligible for coverage. | Planholder Determines | | | | | |
| Pre-existing conditions: A pre-existing condition includes any condition/symptom for which you, in the specified time period prior to coverage in this plan, consulted with a physician, received treatment, or took prescribed drugs. | 3 months look back; 12 months after exclusion | | | | | |
| Premium waived if disabled: Premium will not need to be paid when you are receiving benefits. | Yes | | | | | |
| Survivor benefit: Additional benefit payable to your family if you die while disabled. | 3 months | | | | | |

UNDERSTANDING YOUR BENEFITS—DISABILITY (Some information may vary by state)

- **Disability (long-term):** For first two years of disability, you will receive benefit payments while you are unable to work in your own occupation. After two years, you will continue to receive benefits if you cannot work in any occupation based on training, experience and education.
- Earnings definition: Your covered salary includes average bonuses and commissions.
- **Special limitations:** Provides a 24-month benefit limit for specific conditions including mental health and substance abuse. Other conditions such as chronic fatigue are also included in this limitation. Refer to contract for details.
- Work incentive: Plan benefit will not be reduced for a specified amount of months so that you have part-time earnings while you remain disabled, unless the combined benefit and earnings exceed 100% of your previous earnings.

Long-Term Disability Plan Cost Illustration:

To determine the most appropriate level of coverage, you should consider your current basic monthly expenses.

Policy amounts shown based on sample salary amounts only.

| | < 30 | 30–34 | 35–39 | 40–44 | 45–49 | 50–54 | 55–59 | 60-64 | 65+ |
|--------------------------|-------------------------------|---------|---------|---------|---------|---------|----------|---------|---------|
| Your premium rate | \$0.067 | \$0.067 | \$0.223 | \$0.322 | \$0.430 | \$0.565 | \$0.66 I | \$0.497 | \$0.455 |
| | Election Cost Per Age Bracket | | | | | | | | |
| | < 30 | 30–34 | 35–39 | 40–44 | 45–49 | 50–54 | 55–59 | 60-64 | 65+ |
| \$20,000 Annual Salary | | | | | | | | | |
| \$1,000 Monthly Benefit | \$1.12 | \$1.12 | \$3.72 | \$5.37 | \$7.17 | \$9.42 | \$11.02 | \$8.29 | \$7.59 |
| \$30,000 Annual Salary | | | | | | | | | |
| \$1,500 Monthly Benefit | \$1.68 | \$1.68 | \$5.58 | \$8.05 | \$10.75 | \$14.13 | \$16.53 | \$12.43 | \$11.38 |
| \$40,000 Annual Salary | | | | | | | | | |
| \$2,000 Monthly Benefit | \$2.23 | \$2.23 | \$7.43 | \$10.73 | \$14.33 | \$18.83 | \$22.03 | \$16.57 | \$15.17 |
| \$50,000 Annual Salary | | | | | | | | | |
| \$2,500 Monthly Benefit | \$2.79 | \$2.79 | \$9.29 | \$13.42 | \$17.92 | \$23.54 | \$27.54 | \$20.7I | \$18.96 |
| \$60,000 Annual Salary | | | | | | | | | |
| \$3,000 Monthly Benefit | \$3.35 | \$3.35 | \$11.15 | \$16.10 | \$21.50 | \$28.25 | \$33.05 | \$24.85 | \$22.75 |
| \$70,000 Annual Salary | | | | | | | | | |
| \$3,500 Monthly Benefit | \$3.91 | \$3.91 | \$13.01 | \$18.78 | \$25.08 | \$32.96 | \$38.56 | \$28.99 | \$26.54 |
| \$80,000 Annual Salary | | | | | | | | | |
| \$4,000 Monthly Benefit | \$4.47 | \$4.47 | \$14.87 | \$21.47 | \$28.67 | \$37.67 | \$44.07 | \$33.14 | \$30.34 |
| \$90,000 Annual Salary | | | | | | | | | |
| \$4,500 Monthly Benefit | \$5.03 | \$5.03 | \$16.73 | \$24.15 | \$32.25 | \$42.38 | \$49.58 | \$37.28 | \$34.13 |
| \$100,000 Annual Salary | | | | | | | | | |
| \$5,000 Monthly Benefit | \$5.58 | \$5.58 | \$18.58 | \$26.83 | \$35.83 | \$47.08 | \$55.08 | \$41.42 | \$37.92 |
| \$200,000 Annual Salary | | | | | | | | | |
| \$10,000 Monthly Benefit | \$11.17 | \$11.17 | \$37.17 | \$53.67 | \$71.67 | \$94.17 | \$110.17 | \$82.83 | \$75.83 |

A SUMMARY OF DISABILITY PLAN LIMITATIONS AND EXCLUSIONS

- Evidence of Insurability may be required on all late enrollees. This coverage will not be effective until approved by a Guardian underwriter. This proposal is hedged subject to satisfactory financial evaluation. Please refer to certificate of coverage for full plan description.
- You must be working full-time on the effective date of your coverage; otherwise, your coverage becomes effective after you have completed a specific waiting period.
- Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment: (a) exceeding one year; or (b) in an area under travel warning by the US Department of State. Subject to state specific variations.
- For Long-Term Disability coverage, we pay no benefits for a disability caused or contributed to by a pre-existing condition unless the disability starts after you have been insured under this plan for a specified period of time. We limit the duration of payments for long term disabilities caused by mental or emotional conditions, or alcohol or drug abuse.
- We do not pay benefits for charges relating to a covered person: taking part in any war or act of war (including service in the armed forces) committing a felony or taking part in any riot or other civil disorder or intentionally injuring themselves or attempting suicide while sane or insane. We do not

pay benefits for charges relating to legal intoxication, including but not limited to the operation of a motor vehicle, and for the voluntary use of any poison, chemical, prescription or non-prescription drug or controlled substance unless it has been prescribed by a doctor and is used as prescribed. We limit the duration of payments for long term disabilities caused by mental or emotional conditions, or alcohol or drug abuse. We do not pay benefits during any period in which a covered person is confined to a correctional facility, an employee is not under the care of a doctor, an employee is receiving treatment outside of the US or Canada, and the employee's loss of earnings is not solely due to disability.

- This policy provides disability income insurance only. It does not provide "basic hospital", "basic medical", or "medical" insurance as defined by the New York State Insurance Department.
- If this plan is transferred from another insurance carrier, the time an insured is covered under that plan will count toward satisfying Guardian's pre-existing condition limitation period. State variations may apply.
- When applicable, this coverage will integrate with NJ TDB, NY DBL, CA SDI, RI TDI, Hawaii TDI and Puerto Rico DBA, DC PFML and WA PFML.

Contract # GP-1-LTD-15-1.0 et al.

Guardian's Group Long Term Disability Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. This policy provides disability income insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services. Plan documents are the final arbiter of coverage. Policy Form #GP-1-LTD07-1.0, et al, GP-1-LTD-15

Electronic Evidence of Insurability (EOI)

Our online EOI forms are an easier, quicker alternative to traditional paper forms, helping you get covered when you need to provide additional information.

There are a few situations where you need to answer health questions, enroll for higher amounts of coverage, or request coverage after the initial eligibility period. In all of these situations, our online EOI form keeps things simple.

Electronic EOI keeps things simple

With Guardian's electronic EOI forms, your data is kept secure at every stage of the process. And with fewer errors than hand-written forms, and faster submission digitally, it's easier than ever to complete it and get covered.

Electronic EOI can be used for*:

- Basic life
- Voluntary life
- Short term disability
- Long term disability



How it works

You will receive a letter or email from your employer or Guardian with instructions and a unique link to submit your EOI form online.

First register and create an account on Guardian Anytime. Then simply fill out the form, electronically sign it, and click 'Submit'.

Once we receive the form, we'll contact you with any questions, before notifying you (and your employer if the coverage amount changes).

*Applicable to coverage requiring full Evidence of Insurability (not applicable to conditional issue amounts). Electronic EOI is available using most internet browsers.

THIS PAGE INTENTIONALLY LEFT BLANK

GUARDIAN® is a registered trademark of The Guardian Life Insurance Company of America VENSURE HR INC. LONG TERM DISABILITY-OPTION 6 (SIC 1+ AGE BAND)

3 Guardian[®]

Our commitment to you

Please read the documentation referenced below carefully. The notices are intended to provide you important information about our insurance offerings and to protect your interests. Certain ones are required by law.

Important information

Notice Informing Individuals about Nondiscrimination and Accessibility Requirements

Guardian notice stating that it complies with applicable Federal civil rights laws and does not discriminate based on race, color, national origin, age, disability, sex, or actual or perceived gender identity. The notice provides contact information for filing a nondiscrimination grievance. It also provides contact information for access to free aids and services by disabled people to assist in communications with Guardian.

Visit https://www.guardiananytime.com/notice48 to read more.

No Cost Language Services

Guardian provides language assistance in multiple languages for members who have limited English proficiency. Visit **https://www.guardiananytime.com/notice46** to read more.

Long term disability insurance

Disability Offset Notice

Offsets are provisions in your disability coverage that allow the insurer to deduct from your regular benefit other types of income you receive or are eligible to receive from other sources due to your disability. Visit **https://www.guardiananytime.com/notice51** to read more.



ΞG

