



# Term Life Insurance

FOR EMPLOYEES OF MARINER HOLDINGS, LLC

## ELIGIBILITY - ALL ELIGIBLE EMPLOYEES

|  |   |
|--|---|
| <b>Eligibility Requirement</b>           | You must be actively working a minimum of 30 hours per week to be eligible for coverage.  |
| <b>Dependent Eligibility Requirement</b> | To be eligible for coverage, your dependents must be able to perform normal activities, and not be confined (at home, in a hospital, or in any other care facility), and any child(ren) must be under age 21, or 25 if a student. |
| <b>Premium Payment</b>                   | The premiums for this insurance are paid in full by the policyholder. There is no cost to you for this insurance.   |

## BENEFITS

|   |  |                      |         |                                |         |                   |         |
|---|--|----------------------|---------|--------------------------------|---------|-------------------|---------|
| <b>Life Insurance Benefit Amount</b>                                  | For You: \$100,000<br>For Your Spouse: \$10,000<br>For Your Dependent Child(ren):<br><table style="width: 100%; margin-left: 20px;"> <tr> <td style="width: 60%;">Six months and older</td> <td style="text-align: right;">\$5,000</td> </tr> <tr> <td>14 day to less than six months</td> <td style="text-align: right;">\$1,000</td> </tr> <tr> <td>Less than 14 days</td> <td style="text-align: right;">\$1,000</td> </tr> </table> <p>In the event of death, the benefit paid will be equal to the benefit amount after any age reductions less any living care/accelerated death benefits previously paid under this plan.</p> | Six months and older | \$5,000 | 14 day to less than six months | \$1,000 | Less than 14 days | \$1,000 |
| Six months and older  | \$5,000  |                      |         |                                |         |                   |         |
| 14 day to less than six months  | \$1,000  |                      |         |                                |         |                   |         |
| Less than 14 days   | \$1,000  |                      |         |                                |         |                   |         |
| <b>Accidental Death &amp; Dismemberment (AD&amp;D) Benefit Amount</b> | For You: The Principal Sum amount is equal to the amount of your life insurance benefit.   |                      |         |                                |         |                   |         |

## FEATURES

|   |   |             |          |             |
|---|---|-------------|----------|-------------|
| <b>Living Care/ Accelerated Death Benefit</b> | 50% of the amount of the life insurance benefit is available to you if terminally ill, not to exceed \$50,000.  |             |          |             |
| <b>Waiver of Premium</b>                      | If it is determined that you are totally disabled, your life insurance benefit will continue without payment of premium, subject to certain conditions.   |             |          |             |
| <b>Additional AD&amp;D Benefits</b>           | In addition to basic AD&D benefits, you are protected by the following benefits:<br><table style="width: 100%; margin-left: 20px;"> <tr> <td style="width: 33%;">- Seat Belt</td> <td style="width: 33%;">- Airbag</td> <td style="width: 33%;">- Paralysis</td> </tr> </table> | - Seat Belt | - Airbag | - Paralysis |
| - Seat Belt                                   | - Airbag  | - Paralysis |          |             |
| <b>Portability</b>                            | Allows you to continue this insurance program for yourself and your dependents should you leave your employer for any reason, without having to provide evidence of insurability (information about your health). You will be responsible for the premium for the coverage.     |             |          |             |
| <b>Conversion</b>                             | If your employment ends, you may apply for an individual life insurance policy from Mutual of Omaha without having to provide evidence of insurability (information about your health). You will be responsible for the premium for the coverage.                               |             |          |             |

## SERVICES

|  |  |
|--|--|
| <b>Travel Assistance</b>                 | The Travel Assistance program is an added benefit that provides assistance for your travels over 100 miles away from home or outside the country.  |
| <b>Employee Assistance Program (EAP)</b> | The EAP program provides you and your loved ones access to trained professionals and resources for assistance with personal and workplace issues.  |
| <b>Hearing Discount Program</b>          | The Hearing Discount Program provides you and your family discounted hearing products, including hearing aides and batteries. Call 1-888-534-1747 or visit <a href="http://www.amplifonusa.com/mutualofomaha">www.amplifonusa.com/mutualofomaha</a> to learn more.                             |
| <b>Will Prep</b>                         | We work with Willing® to offer employees an online will prep tool. In just a few clicks you can complete a customized plan to protect your family and property (valid in all 50 states). To get started visit <a href="http://www.willing.com/mutualofomaha">www.willing.com/mutualofomaha</a> |

## **AGE REDUCTIONS AND EXCLUSIONS**

Insurance benefits and guarantee issue amounts are subject to age reductions:

- At age 70, amounts reduce to 65%
- At age 75, amounts reduce to 55%
- At age 80, amounts reduce to 30%

Information about the AD&D exclusions for this plan will be included in the summary of coverage, which you will receive after enrolling.

Please contact your employer if you have questions prior to enrolling.

# > Frequently Asked Questions

## Who is eligible for this insurance?

- You must be actively working (performing all normal duties of your job) at least 30 hours per week.
- Your dependent(s) must be performing normal activities and not be confined (at home or in a hospital/care facility) and any child(ren) must be under age 21, or under age 25 if a student.

## What is Guarantee Issue?

The amount of insurance applied for without answering any health questions (or which does not require evidence of insurability). Coverage amounts over the Guarantee Issue Amount will require evidence of insurability.

## What is Evidence of Insurability?

Evidence of Insurability or proof of good health – may be required if you are a late entrant and/or you request any additional coverage above your guarantee issue amount.

## Can I take this insurance with me if I change jobs/am no longer a member of this group?

In the event this insurance ends due to a change in your employment/membership status with the group, or for certain other reasons, you or your insured spouse may have the right to continue this insurance under the Portability or Conversion provision, subject to certain conditions.

## Are there any limitations, reductions or exclusions?

The benefits payable are based on the following:

- Insurance benefits and guarantee issue amounts are subject to age reductions:
  - At age 70, amounts reduce to 65%
  - At age 75, amounts reduce to 55%
  - At age 80, amounts reduce to 30%
- Information about the AD&D exclusions for this plan will be included in the summary of coverage, which you will receive after enrolling.

All exclusions may not be applicable, or may be adjusted, as required by state regulations.

This information describes some of the features of the benefits plan. Benefits may not be available in all states. Please refer to the certificate booklet for a full explanation of the plan's benefits, exclusions, limitations and reductions. Should there be any discrepancy between the certificate booklet and this outline, the certificate booklet will prevail. Life insurance and accidental death & dismemberment insurance are underwritten by United of Omaha Life Insurance Company, 3300 Mutual of Omaha Plaza, Omaha, NE 68175. Policy form number 7000GM-U-EZ 2010 or state equivalent (in NC: 7000GM-U-EZ 2010 NC). United of Omaha Life Insurance Company is licensed nationwide, except New York.



